31 (Official Form 1) (4/10)								
United States Bank		VOLUNTARY PETITION						
Southern District of	I New York	Name of Joint Debtor (Spouse) (Last, First, Middle):						
Name of Debtor (if individual, enter Last, First, Middle): Republic Group, LLC		I N/A						
All Other Names used by the Debtor in the last 8 years		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):						
(include married, maiden, and trade names):		N/A						
N/A  Last four digits of Soc. Sec. or Individual-Taxpayer I.D.	(ITIN)/Complete FIN	Last four digi	its of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN	$\neg$				
(if more than one, state all):	(1111) Compress Dir.	(if more than	one, state all):	_				
83-0396188 Street Address of Debtor (No. and Street, City, and State	١٠	Street Address	ss of Joint Debtor (No. and Street, City, and State):	٦				
260 West 36th Street, RM 901	<i>j</i> -	N/A		-				
New York, NY			CVN CORENIA					
·	ZIP CODE 10018	G t CD	ZIP CODEN/A esidence or of the Principal Place of Business:					
County of Residence or of the Principal Place of Busines New York	ss:	1 N/A						
Mailing Address of Debtor (if different from street addre	ess):		ress of Joint Debtor (if different from street address):					
Same		N/A						
	ZIP CODE Same		ZIP CODEN/A					
Location of Principal Assets of Business Debtor (if differ	erent from street address above)	:	CORE CORE CORE	, ]				
Same			ZIP CODE Same  Chapter of Bankruptcy Code Under Which	$\dashv$				
Type of Debtor (Form of Organization)	Nature of Busin (Check one box		the Petition is Filed (Check one box.)					
(Check one box.)	`		Chapter 7 Chapter 15 Petition for					
☐ Individual (includes Joint Debtors)	Single Asset Real Estat	e as defined in	Chapter 9 Recognition of a Foreign					
See Exhibit D on page 2 of this form.	11 U.S.C. § 101(51B) Railroad		Chapter 12 Chapter 15 Petition for					
☐ Partnership	Railroad Stockbroker Commodity Broker		Chapter 13 Recognition of a Foreign Nonmain Proceeding					
Other (if debtor is not one of the above entities, check this box and state type of entity below.)	☐ Clearing Bank ☑ Other		Nature of Debts	-				
Choose and Continue that yet	☑ Other Financial		(Check one box.)					
	Tax-Exempt En	tity	☐ Debts are primarily consumer ☑ Debts are primarily					
	(Check box, if appli		debts, defined in 11 U.S.C. business debts.					
	Debtor is a tax-exempt under Title 26 of the U	organization Inited States	§ 101(8) as "incurred by an individual primarily for a					
	Code (the Internal Rev	enue Code).	personal, family, or house- hold purpose."					
Filing Fee (Check one bo	x )	T	Chapter 11 Debtors					
•	,	To Dobbe	peck one box: Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).					
Full Filing Fee attached.		☐ Debto	Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).					
Filing Fee to be paid in installments (applicable t signed application for the court's consideration or	o individuals only). Must attact			1				
unable to pay fee except in installments. Rule 10	06(b). See Official Form 3A.	Debto	or's aggregate noncontingent liquidated debts (excluding debts owe ers or affiliates) are less than \$2,343,300 (amount subject to adjustn	a to tent				
Filing Fee waiver requested (applicable to chapte	er 7 individuals only). Must	on 4/	01/13 and every three years thereafter).					
attach signed application for the court's consider	ation. See Official Form 3B.	Check all	applicable boxes:					
		واملا التا	an is being filed with this petition.  ptances of the plan were solicited prepetition from one or more class	ses				
		of cre	editors, in accordance with 1,1 U.S.C. § 1126(b).					
Statistical/Administrative Information		# H	COURT USE ON					
Debtor estimates that funds will be available Debtor estimates that, after any exempt prodistribution to unsecured creditors.	e for distribution to unsecured of perty is excluded and administra	reditors. ative expenses p	oaid, there will be no funds available for					
Estimated Number of Creditors								
	1,000- 5,001-	10,001-	25,001- 50,001- Over FT					
1-49 50-99 100-199 200-999	5,000 10,000	25,000	25,001- 50,000 100,000 100,000 5	-				
Estimated Assets								
\$0 to \$50,001 to \$100,001 to \$500,001	\$1,000,001 \$10,000,001	\$50,000,001						
\$50,000 \$100,000 \$500,000 to \$1	to \$10 to \$50 million million	to \$100 million	to \$500 to \$1 billion \$1 billion million					
million  Estimated Liabilities	manon manon		_					
	\$1,000,001 \$10,000,001	\$50,000,001	\$100,000,001 \$300,000,001 111010 111111					
\$50,000 \$100,000 \$500,000 to \$1	to \$10 to \$50	to \$100	to \$500 to \$1 billion \$1 billion					
million	million million	million	million					

14 (OVE '-1 F 1) (AHA)		Page 2				
Noluntary Petition	Name of Debtor(s):					
(This page must be completed and filed in every case.)  All Prior Bankruptcy Cases Filed Within Last 8 Y	Republic Group, LLC	nal sheet.)				
	Case Number:	Date Filed:				
Location Where Filed:		Date Filed:				
Location	Case Number:					
Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affil	liate of this Debtor (If more than one, attach	additional sheet.)				
Name of Debtor:	Case Number:	Date Filed:				
District: Gth. am District of Naw York	Relationship:	Judge:				
Southern District of New Tork	Exhibi	t B				
Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)	(To be completed if det whose debts are primari I, the attorney for the petitioner named it have informed the petitioner that [he or sho or 13 of title 11, United States Code, and he each such chapter. I further certify that I required by 11 U.S.C. § 342(b).	otor is an individual ily consumer debts.)  In the foregoing petition, declare that I is a proceed under chapter 7, 11, 12, ave explained the relief available under				
Exhibit A is attached and made a part of this petition.	X Signature of Attorney for Debtor(s)	(Date)				
Exhibi						
Does the debtor own or have possession of any property that poses or is alleged to pose a	threat of imminent and identifiable harm to	public health or safety?				
☑ No.						
Exhibit  (To be completed by every individual debtor. If a joint petition is filed, each spouse must be spouse must be shibit D completed and signed by the debtor is attached and made a part of this lift this is a joint petition:  Exhibit D also completed and signed by the joint debtor is attached and made a part of this lift be spouse.	st complete and attach a separate Exhibit D.) s petition.					
Information Regarding (Check any app  Debtor has been domiciled or has had a residence, principal place preceding the date of this petition or for a longer part of such 180 day	of business, or principal assets in this Distr ys than in any other District.	ict for 180 days immediately				
There is a bankruptcy case concerning debtor's affiliate, general part		and the second second				
Debtor is a debtor in a foreign proceeding and has its principal place no principal place of business or assets in the United States but is a District, or the interests of the parties will be served in regard to the new order.	a defendant in an action or proceeding (in a	States in this District, or has federal or state court] in this				
Certification by a Debtor Who Resides (Check all appli	s as a Tenant of Residential Property icable boxes.)					
Landlord has a judgment against the debtor for possession of debt	tor's residence. (If box checked, complete th	e following.)				
	(Name of landlord that obtained judgment)  (Address of landlord)					
Debtor claims that under applicable nonbankruptcy law, there are entire monetary default that gave rise to the judgment for possess	circumstances under which the debtor would	the permitted to cure the tered, and				
Debtor has included with this petition the deposit with the court of the petition.	of any rent that would become due during the	30-day period after the filing				
Debtor certifies that he/she has served the Landlord with this cert	ification. (11 U.S.C. § 362(1)).					

or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

[If debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11 of the Bankruptcy Code, this Exhibit "A" shall be completed and attached to the petition.]

# UNITED STATES BANKRUPTCY COURT

Southern District of New York

er is Noted to the control of the co	lebtor's securities a //A g financial data is th  ncluding debts listers held by more that unsecured  unsecured	HIBIT "A" TO VO are registered under Sect ————————————————————————————————————	ion 12 of the	e Securit	ies Exchang	ge Act of 1934, the condition on
er is Note of the control of the con	lebtor's securities a //A g financial data is th  ncluding debts listers held by more that unsecured  unsecured	he latest available informed in 2.c., below)  an 500 holders:	ion 12 of the	RY PE' e Securit efers to t	<b>FITION</b> ies Exchang he debtor's	ge Act of 1934, the condition on
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er is Note of the control of the con	lebtor's securities a //A g financial data is th  ncluding debts listers held by more that unsecured  unsecured	he latest available informed in 2.c., below)  an 500 holders:	ion 12 of the	e Securit	ies Exchang	condition on
er is Note of the control of the con	lebtor's securities a //A g financial data is th  ncluding debts listers held by more that unsecured  unsecured	he latest available informed in 2.c., below)  an 500 holders:	ion 12 of the	e Securit	ies Exchang	condition on
er is Note of the control of the con	g financial data is the concluding debts listed as held by more that unsecured □	he latest available informed in 2.c., below) in 500 holders:	nation and re	efers to t	he debtor's	condition on
assets debts (i	g financial data is the concluding debts listed as held by more that unsecured	ed in 2.c., below) in 500 holders:		s <u> </u>		
debts (i	es held by more that	n 500 holders:				<u> </u>
debts (i	es held by more that	n 500 holders:		\$		
securitio	es held by more that	n 500 holders:	•			Approximate number of holders:
_		subordinated	•			
	. <b>-</b>					
٠	unsecured 🗇	subordinated				
ø	unsecured 🏻	subordinated				
Ø	unsecured 🏻	subordinated 🏻				
ø	unsecured 🏻	subordinated	<b>\$</b>			
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ber of s	hares common stoc	k			·	
ments. i	fanv:					
f descrit	tion of debtor's bu	isiness:				
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In Re: Republic Group, LL	C : Chapter 11 Case No : Debtor. :
	X
CORPORATE AUTHORIZA	TION PURSUANT TO LOCAL BANKRUPTCY RULE 1074-1(a)
Republic Group, LLC, undersigne states as follows:	d debtor herein, pursuant to Local Bankruptcy Rules 1074-1(a)
York on January 16, 2004. principle place of business Debtor's telephone numbe	
<ol><li>Debtor has not undergone shareholder, officer, and be</li></ol>	a corporate resolution. Debtor is solely owned by its sole oard member Mr. Rafael Martinez.
3. Mr. Rafael Martinez hereb debtor under Chapter 11 o	by authorizes the filing of the attached Voluntary Petition for f the Bankruptcy Code.
Dated: January 31, 2011	
	Rafael Martinez, President and Shareholder Republic Group, LLC 260 West 36 <sup>th</sup> Street, Suite 901 New York, NY 10018
State of New York	
County of New York	
Subscribed to and sworn before 2011 (year), by RAFaet MA	e me this 3/5t day of SANVARY (month), minut (name of signer)
my states	was alla
NOTARY JERRY 1808 NOTARY PUBLIC State of New YORK	EES mella

# DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, [the president or other officer or an authorized agent of the corporation] [or a member or an authorized agent of the partnership] named as the debtor in this case, declare under penalty of perjury that I have read the foregoing [list or schedule or amendment or other document (describe)] and that it is true and correct to the best of my information and belief.

Date \\28\1\

Signature

Print Name and Title)

# State of New York Department of State

I hereby certify, that REPUBLIC GROUP, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 01/16/2004, and that the Limited Liability Company is subsisting so far as shown by the records of the Department.



\*\*\*

Witness my hand and the official seal of the Department of State at the City of Albany, this 06th day of May two thousand and four.

Secretary of State

200405070338 \* 13

UNITED STATES BANKRUPTCY O SOUTHERN DISTRICT OF NEW YO	COURT ORK	Y	
In Re: Republic Group, LLC	Debtor.	: : : :	Chapter 11 Case No

# AFFIDAVIT PURSUANT TO LOCAL BANKRUPTCY RULE 1007-2

Republic Group, LLC, undersigned debtor herein, swears as follows:

- Debtor is a Limited Liability Corporation established under the laws of the State of New York on January 16, 2004. Debtor's Tax Identification Number is 83-0396188 and principle place of business is 260 West 36<sup>th</sup> Street, Debtor's telephone number is (212) 629-4930.
- 2. Debtor is in the business of providing various financial services to clients and customers. Debtor has fallen into arrears in its debts and obligations and has insufficient means to satisfy such debts and obligations.
- 3. Debtor formed no committees organized prior to the order for relief in the chapter 11.
- 4. Debtor has the following unsecured creditors:
  - a. Capital One Credit Card, P.O. Box 30285, Salt Lake City, UT 84130, Amount of Claim: \$7,500.00. Debt is disputed.
  - b. West 37<sup>th</sup> Garage, 417 West 37<sup>th</sup> St., New York, NY 10018, Amount of Claim: \$825.00, Debt is disputed.
  - c. Pitney Bowes, 1 Elmcroft Road, Stamford, CT 06926, Amount of Claim: \$2,300.00. Debt is disputed.
  - d. JP Morgan Chase, P.O. Box 36520, Louisville, KY 40233, Amount of Claim: \$1,700.00. Debt is disputed.
  - e. Home Depot, P.O. Box 9058, Gray, TN 37615, Amount of Claim: \$12,000.00. Debt is disputed.
  - f. Home Depot, P.O. Box 9058, Gray, TN 37615, Amount of Claim: \$15,000.00. Debt is disputed.

- g. Home Depot, P.O. Box 9058, Gray, TN 37615, Amount of Claim: \$7,500.00. Debt is disputed.
- 5. Debtor has the following secured creditors:
  - a. TD Bank NA C/O COHN LIFLAND PEARLMAN HERRMANN & KNOPF LLP, 250 Pehle Avenue Suite 401, Saddle Brook, NJ 07663, Amount of the Claim: \$100,000.00 Corporation Loan Judgment No.: J-171123-10. Debt is disputed. Debt is collateralized by personal guarantee of debtor's sole shareholder and President Rafael Martinez and co-signatories.
  - b. 260 West 36 Associates, LLC, 260 West 36<sup>th</sup> Street, 5<sup>th</sup> Floor, New York, NY 10018, Amount of the Claim: \$40,000 Back Rent. Debt is disputed. Debt is collateralized by its leasehold interest as commercial tenant in the rental property of 260 West 36<sup>th</sup> Street, RM 901, New York, NY 10018 and personal guarantee of debtor's sole shareholder and President Rafael Martinez.
  - c. PNC Bank NA C/O OSTROWITZ & OSTROWITZ, 225 Gordons Corner Road, Manalapan, NJ 07726, Amount of the Claim: \$125,000 Corporate Loan. Debt is disputed. Debt is collateralized by personal guarantee of debtor's sole shareholder and President Rafael Martinez.
  - d. Paran Realty C/O HOWARD W. BURNS, JR., 170 Broadway, Suite 609, New York, NY 10038, Amount of the Claim: \$563,990.29 Corporate Loan. Debt is disputed. Debt is collateralized by personal guarantee of debtor's sole shareholder and President Rafael Martinez.
- 6. Debtor's assets are solely limited to equipment and furniture. Debtor's liabilities constitute the debts stated above.
- 7. Debtor is not a publicly held corporation.
- 8. Debtor has no property in the possession or custody of any custodian, public officer, mortgagee, pledgee, assignee of rents, or secured creditor, or agent for any such entity.
- 9. Debtor's sole leasehold interest is in the property located at 260 West 36<sup>th</sup> St., RM 901, New York, NY 10018. Debtor has no other interests in any other premises for the operation of debtor's business.
- 10. Debtor's substantial assets, books, and records are located at 260 West 36<sup>th</sup> St., RM 901, New York, NY 10018. Debtor has no assets outside the territorial limits of the United States.
- 11. Debtor has been threatened with legal action by the following secured creditors of debtor: 260 West 36 Associates, LLC, 260 West 36<sup>th</sup> Street, 5<sup>th</sup> Floor, New York, NY 10018, TD Bank NA C/O COHN LIFLAND PEARLMAN HERRMANN & KNOPF LLP, 250

Pehle Avenue - Suite 401, Saddle Brook, NJ 07663, PNC Bank NA C/O OSTROWITZ & OSTROWITZ, 225 Gordons Corner Road, Manalapan, NJ 07726, and Paran Realty C/O HOWARD W. BURNS, JR., 170 Broadway, Suite 609, New York, NY 10038. Creditor 260 West 36 Associates, LLC has a pending nonpayment proceeding against debtor. Creditors TD Bank NA C/O COHN LIFLAND PEARLMAN HERRMANN & KNOPF LLP and PNC Bank NA C/O OSTROWITZ & OSTROWITZ, 225 Gordons Corner Road, Manalapan, NJ 07726 have obtained civil judgments against debtor for the amounts due.

- 12. Debtor's sole existing senior management is its sole shareholder and President Rafael Martinez. Mr. Martinez has assumed these roles since 2005. Mr. Martinez is also acting Chief Executive Officer and solely responsible for the day-to-day management of debtor.
- 13. Debtor does expect to continue operating its business. The estimated amount of the weekly payroll to employees for the 30 day period following the filing of the chapter 11 petition is approximately \$1,700.00. The estimated amount to be paid or proposed to be paid for services for the 30 day period following the filing of the chapter 11 petition to officers, stockholders, and directors is approximately \$3,000.00.
- 14. Debtor's schedule, for the 30 day period following the filing of the chapter 11 petition, of estimated cash receipts and disbursements, net cash gain or loss, obligations and receivables expected to accrue but remain unpaid, other than professional fees, and any other information relevant to an understanding of the foregoing are at this point uncertain and dependent upon contracts that have not yet been finalized.

Dated: January 31, 2011

Rafael Martinez, President and Shareholder

Republic Group, LLC

260 West 36th Street, Suite 901

New York, NY 10018

State of New York

County of New York

Subscribed to and sworn before me this 3/3 day of 5000 (month), 2=11 (year), by RAFAEC MARTER (name of signer)

Mhos county

Mycomissionenphes 3/29/2014

# UNITED STATES BANKRUPTCY COURT

Southern District of New York

In re Republic		Case No.			
	Debtor	•	Chapter 11		
	OF CREDITORS HO				
prepared in acc The list does n § 101, or (2) so places the cred creditors holdi child's parent of	ving is the list of the debto cordance with Fed. R. Bar ot include (1) persons whereured creditors unless the litor among the holders of ng the 20 largest unsecured guardian, such as "A.B. See, 11 U.S.C. §112 and F	akr. P. 1007(d) for filing of come within the define value of the collateral the 20 largest unsecured claims, state the child, a minor child, by John	g in this chapter 11 [or chapter of the inition of "insider" set forth is such that the unsecured claims. If a minor child d's initials and the name and Doe, guardian." Do not	apter 9] case.  In in 11 U.S.C.  I deficiency  is one of the  and address of the	
(1)	(2)	(3)	(4)	(5)	
Name of creditor and complete mailing address, including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, state valudisputed or subject to setoff	Amount of claim [if secured also se of security]	
Se	e A TrAched	LIST			
Date: _					
	r	Declaration as in En	Debtor	,	
	L	Declaration as in Fo	rm 2j		

### Creditors' Matrix for Republic Group, LLC

#### **Unsecured Creditors**

- 1. Capital One Credit Card, P.O. Box 30285, Salt Lake City, UT 84130, Amount of Claim: \$7,500.00. Debt is disputed.
- 2. West 37<sup>th</sup> Garage, 417 West 37<sup>th</sup> St., New York, NY 10018, Amount of Claim: \$825.00, Debt is disputed.
- 3. Pitney Bowes, 1 Elmcroft Road, Stamford, CT 06926, Amount of Claim: \$2,300.00. Debt is disputed.
- 4. JP Morgan Chase, P.O. Box 36520, Louisville, KY 40233, Amount of Claim: \$1,700.00. Debt is disputed.
- 5. Home Depot, P.O. Box 9058, Gray, TN 37615, Amount of Claim: \$12,000.00. Debt is disputed.
- 6. Home Depot, P.O. Box 9058, Gray, TN 37615, Amount of Claim: \$15,000.00. Debt is disputed.
- 7. Home Depot, P.O. Box 9058, Gray, TN 37615, Amount of Claim: \$7,500.00. Debt is disputed.

### **Secured Creditors**

- 1. TD Bank NA C/O COHN LIFLAND PEARLMAN HERRMANN & KNOPF LLP, 250 Pehle Avenue Suite 401, Saddle Brook, NJ 07663.
- 2. 260 West 36 Associates, LLC, 260 West 36th Street, 5th Floor, New York, NY 10018.
- 3. PNC Bank NA C/O OSTROWITZ & OSTROWITZ, 225 Gordons Corner Road, Manalapan, NJ 07726.
- 4. Paran Realty C/O HOWARD W. BURNS, JR., 170 Broadway, Suite 609, New York, NY 10038.

		en de la companya de La companya de la co
UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF NEW YORK		
	X :	
	:	
In Re: Republic Group, LLC	:	Chapter 11 Case No
Debtor.	: X	
STATEMENT OF COR	PORAT	E OWNERSHIP
Comes now Republic Group, LLC (the "Debtor" 7007.1 state as follows:	') and pu	rsuant to Fed. R. Bankr. P. 1007(a) and
<ol> <li>There are no corporations that directly or Debtor's equity interests.</li> </ol>	indirect	ly own 10% or more of any class of the
Dated: January 31, 2011		
Ву	/	181 111
		Martinez, President and Shareholder ic Group, LLC
	260 We	est 36 <sup>th</sup> Street, Suite 901
	New Y	ork, NY 10018
		· · · · · · · · · · · · · · · · · · ·
State of New York		#
County of New York		} 1-
Subscribed to and sworn before me this 3/201/(year), by Lakael Harribez (no	$\frac{\sqrt{5}}{2}$ day	y of Janual Ymonth),
O Attorba	ame or b.	gnor)
to property	.*	
Jerrey Jose Esmella		
1010 0 0 11C		
NOTARY PUBLIC		· ·
State of newyork		
King Scanty		
NO. 02 ES 61/9795	Zhoi	2014
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# Republic Group,LLC Balance Sheet As of January 28, 2011

	Jan 28, 11
ASSETS Current Assets Checking/Savings Credit Card Account 1000 · CHASE	-202.38 -75,363.11
Total Checking/Savings	-75,565.49
Other Current Assets 1506 · Due to VMC event 1515 · Offset Bank Account	-362.00 -1,707.72
Total Other Current Assets	-2,069.72
Total Current Assets	-77,635.21
Other Assets 1060 - Due from/to New Edge Capital 1505 - Loan to/from Vision Meida	100.00 -179,987.00
Total Other Assets	-179,887.00
TOTAL ASSETS	-257,522.21
LIABILITIES & EQUITY Liabilities Current Liabilities Accounts Payable 2000 · Accounts Payable	804,945.51
Total Accounts Payable	804,945.51
Other Current Liabilities 24000 · Payroll Liabilities 2570 · Obie Mckenzie Loan Liability	81,702.87 -1,650.00
<b>Total Other Current Liabilities</b>	80,052.87
Total Current Liabilities	884,998.38
Long Term Liabilities Carlos Estevez	55,400.00
Total Long Term Liabilities	55,400.00
Total Liabilities	940,398.38
Equity 1110 · Retained Earnings 1520 · Capital Stock 3000 · Opening Bal Equity	-1,364,390.43 148,156.46 18,313.38
Total Equity	-1,197,920.59
TOTAL LIABILITIES & EQUITY	-257,522.21

### **Financial Statement**

Statement of Operations Republic Group, LLC. 260 West 36<sup>th</sup> Street New York, NY 10018 12 Months Ended December 31, 2010

	Current Month	Y.T.D. Actual	Annual Budget	(Under)/Over Budget
REVENUES Commissions	0.00	159,500.00	352,500.00	(193,000.00)
Total Revenues	0.00	159,500.00	352,500.00	(193,000.00)
EXPENSES Salaries Overhead/ Loans	0.00 27,300.00	52,385.35 303,158.21	153,000.00 105,000.00	(100,615.35) 198,158.21
Total Expenses	27,300.00	355,543.56	258,000.00	97,543.56
NET FROM CURRENT OPERATIONS	(27,300.00)	(257,522.21)	94,500.00	(163,022.21)

3:05 PM 01/28/11

# Republic Group,LLC Statement of Cash Flows

January through December 2010

•	Jan - Dec 10
OPERATING ACTIVITIES  Net Income  Adjustments to reconcile Net Income	-1,056,572.19
to net cash provided by operations:  1506 · Due to VMC event  2000 · Accounts Payable  24000 · Payroll Liabilities  2570 · Obie Mckenzie Loan Liability	362.00 804,092.40 42,372.25 -1,650.00
Net cash provided by Operating Activities	-211,395.54
INVESTING ACTIVITIES  1060 · Due from/to New Edge Capital  1505 · Loan to/from Vision Meida	-100.00 134,612.00
Net cash provided by Investing Activities	134,512.00
Net cash increase for period	-76,883.54
Cash at beginning of period	1,318.05
Cash at end of period	-75,565.49

	1	<b>065</b>	ĺ		U.S.	Return of F	artners	ship l	ncon	ne			OMB No. 1545-0099
For	m	the Treasury	For ca	itendar y	year 2009, or tax yea	NTED TO 0		, end	ling		1		<b>2009</b>
Inte	rnal Revenu	ie Service	EX,	TEN	SION GRA	NTED TO 0	<u>9/15/10</u>						LUUU
		usiness activity	ł	Use	Name of partnershi	P							D Employer identification number
		ESTATE	ı	the	L								83-0396188
<u>II</u>	VEST	MENTS		IZDel,		C GROUP, Lid room or suite no. If a P.C		trustions					F Date business started
_		roduct or service		Other- wise,			•		0.01				01/16/2004
		ABLES		print or	City or town, state	T 36TH STR	EET, SU	TIL	301				F Total assets
	INANO	CTING		type.	Oity or rount, state	, wio 211 0000							
v	31390				NEW YORK	τ	,		N	TY 10	018		\$ 481,588.
		pplicable boxes:	· (		Initial return	(2) Final retu	rn (3)	Name o			Address ch	ange	
u	OHEOR A	ρριιοαυίο σολου.	•	· —		ination - also check (1				., —		•	
н	Check a	ccounting meth				(2) Accrual		Other (	specify) 🕨	<b></b>			
1	Number	of Schedules K	-1. At	tach o	ne for each perso	n who was a partner a	t any time durir	ig the tax	year 🕨	<b></b>	2		
J	Check if	Schedules C an	id M-3	are at	ttached	***************************************				************			
Ca	ution In	clude only tra	do or	husin	ess income and	l expenses on lines	1a through 22	below. i	See the ir	nstruction	s for more	info	rmation.
									_,				
									3	<u> </u>	,505.	1c	281,505.
	b L	ess returns and	allowa	ances					0			10	201,3034
	. ا	net of anode co	dd (Sr	hadul	e Δ line R)							2	
_	2 Cost of goods sold (Schedule A, line 8) 3 Gross profit, Subtract line 2 from line 1c									3	281,505.		
Income						s, estates, and trusts (						4	
2		-				orm 1040))						5	
	. 6 N	let gain (loss) fr	om Fo	rm 47	97, Part II, line 17	(attach Form 4797)	}		,			6	
				,									
	7 0	ther income (lo	ss) (at	tach :	statement)							7	
						<b>→</b>						8	281,505.
	8 T	otal income (lo	ss), C	ombin	ie lines 3 through	7		********				•	201,003.
	, ,	otorine and war	ac (ntl	har tha	an to nartnere) (le	ss employment credit	c)					9	105,416.
ons												10	
s for limitations)	1					***************************************						11	13,586.
ᆵ	1											12	
s fo	13 R	ent										13	5,833.
tion	14 T:	axes and license	es		*****************		SE	EST	ATEM	ENT 1		14	10,663.
120	, ,,					***************************************						15	61,055.
inst					tach Form 4562		************	16	a				
ŝ						elsewhere on return				<del> </del>		16c	
Deductions (see the instruction	•					on.)						18	
<u>s</u>		mployee benefit										19	
<u>Ş</u>	ابد س،		yı			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						$\Box$	
ğ	20 0	ther deductions	(attac	ch sta	itement)		SE	E ST	ATEM	ENT 2		20	78,201.
ا ۃ					_								
						the far right column fo	or lines 9 throug	n 20				21	274,754.
	22 0	rdinary busines	s inco	me/le	oss) Subtract lin	e 21 from line 8	fing accompanying	n echadulas	and statem	ents and to	the best of m	22 IV knov	6,751.
		correct, and or knowledge.	omplete	a jury, 11 e. Decla	ration of preparer (o	ther than general partner of	r limited liability o	ompany me	nber manag	jer) is based	on all inform	ation o	wiedge and belief, it is true, If which preparer has any the IRS discuss this return
Sign Her		Kitotrioogo,	4	1	LL_				<b> </b>		ļ		ne preparer shown below
1101	ŭ.	Signature	of gene	eral pad	er or limited liabilit	y company member mana	ger	<del>. :</del>	Date			(see in	str.)? X Yes No
		Dreamara's			<del>\</del>	4.		Date	<u> </u>	1			Preparer's SSN or PTIN
Paid	ń	Preparer's signature						Jaio		Check if self-emp			P00009773
	u parer's	Firm's name (or	S	ANS	IVERI. 1	ONG & CO.	, L.L.C	!				22	-3769808
	Only	yours if self- employed),		135					`		Phone no.	(9'	73) 472-1817
	•	address, and ZIP code	CI	LIF	TON, NJ	07013							

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form **1065** (2009)

	1065 (2009) REPUBLIC GROUP,	т.т.С		83-0396	188	Page 2
orm	hedule A Cost of Goods Sold (see the	na instructions)				
<u> 50</u>		ne man denonay		1		
	Inventory at beginning of year Purchases less cost of items withdrawn for personal					
				1 4 1		
3	Cost of labor					
1	Additional section 263A costs (attach statement)					
5	Other costs (attach statement)		······			
6	Total. Add lines 1 through 5					
7	Inventory at end of year			***************************************		
В	Cost of goods sold. Subtract line 7 from line 6. Enter		2			
9 a	Check all methods used for valuing closing inventory					
	(i) Cost as described in Regulations section					
	(ii) Lower of cost or market as described in F	· ·	-4			
	(iii) Other (specify method used and attach ex	xplanation) ►	<u> </u>	<u></u>		
b	Check this box if there was a writedown of "subnorm	al" goods as described in	Regulations section 1.47	1-2(c)		<del>_</del>
¢	Check this box if the LIFO inventory method was add	pted this tax year for any	goods (if checked, atta	ch Form 970)	▶  1	₩
d	Do the rules of section 263A (for property produced	or acquired for resale) ap	ply to the partnership?		Yes	No No
ė	Was there any change in determining quantities, cos	t, or valuations between o	pening and closing inven	tory?	Yes	No
	If "Yes," attach explanation.					
Sc	hedule B Other Information				<del></del>	
1	What type of entity is filing this return? Check the ap	oplicable box:			<u> Y</u>	es No
а		omestic limited partnershi	р			1
C		omestic limited liability pa	rtnership			-
e	The state of the s	ther <b>&gt;</b>				
2	At any time during the tax year, was any partner in the	ne partnership a disregard	ed entity, a partnership (i	ncluding an entity treated as a		
-	partnership), a trust, an S corporation, an estate (oth				L	<u> X</u>
3	At the end of the tax year:				ŀ	1.
	Did any foreign or domestic corporation, partnership	(including any entity trea	ited as a partnership), tru	st, or tax-exempt organization own,	1	
•	directly or indirectly, an interest of 50% or more in the	he profit. loss, or capital o	f the partnership? For rule	es of constructive ownership, see		
	instructions. If "Yes," attach Schedule B-1, Information	on on Partners Owning 50	% or More of the Partner	ship	L	X
b	Did any individual or estate own, directly or indirectly	v. an interest of 50% or m	ore in the profit, loss, or o	capital of the partnership? For rules of		
	constructive ownership, see instructions. If "Yes," att	tach Schedule B-1. Inform	ation on Partners Owning	50% or More of the Partnership	🚨	K
4	At the end of the tax year, did the partnership:		•			
	Own directly 20% or more, or own, directly or indirectly	ctiv 50% or more of the t	otal voting power of all cla	asses of stock entitled to vote of any fore	ign	ľ
a	or domestic corporation? For rules of constructive of					x
	(i) Name of Corporation	micromp, des med determ	(ii) Employer	(iii) Country of		ercentage
	(1) Name of Corporation		Identification Number (if any)	Incorporation		ned in ng Stock
_						
_	Own directly an interest of 20% or more, or own, dir	actly or indirectly an inter	est of 50% or more in the	profit loss or capital in any foreign or		
þ	domestic partnership (including an entity treated as	eony or muneony, an inter- e contrarchie) or in the be-	eat of 2076 of interest of a trust	2 For rules of constructive ownership se	e	
			mencial interest of a must	1 Of Tules of collect active extremely so		x
	instructions. If "Yes," complete (i) through (v) below		2223 T & F - & L .	(iv) Country of	(v)	Maximum
	(i) Name of Entity	(ii) Employer Identification Number	(iii) Type of Entity	Organization	Percent	ige Owned in oss, or Capital
		(if any)		Organizations	11044, 21	value
					<del></del>	
	4					
					+	
					C 40	8E (0000)
					Form 10	<b>65</b> (2009)

Form	1065 (2009) REPUBLIC GROUP, LLC 63-039616	0 (	
		Yes	No
5	Did the partnership file Form 8893, Election of Partnership Level Tax Treatment, or an election statement under section 6231(a)(1)(B)(ii)		
•	for partnership-level tax treatment, that is in effect for this tax year? See Form 8893 for more details		<u>X</u>
6	Does the partnership satisfy all four of the following conditions?		
	The partnership's total receipts for the tax year were less than \$250,000.		
ъ ь	The partnership's total assets at the end of the tax year were less than \$ 1 million.		
•	Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership		
•	return.		
_	The partnership is not filing and is not required to file Schedule M-3		X
u	If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; Item F on page 1 of Form 1065;		
	or Item L on Schedule K-1.		
7	Is this partnership a publicly traded partnership as defined in section 469(k)(2)?		X
	During the tax year, did the partnership have any debt that was cancelled, was forgiven, or had the terms modified so as to reduce the		
8	principal amount of the debt?	1	x
	Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any		
9			х
	reportable transaction?  At any time during calendar year 2009, did the partnership have an interest in or a signature or other authority over a financial account in a		
10	foreign country (such as a bank account, securities account, or other financial account)? See the instructions for exceptions and filing		
	requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign		er er
	·		x
	country. At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes,"		
11	the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts.	1	,
	See instructions		x
	Is the partnership making, or had it previously made (and not revoked), a section 754 election?		X
128	See instructions for details regarding a section 754 election.		
	Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing		-
Ь	the computation and allocation of the basis adjustment. See instructions	1	x
	Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined	-	<del></del> -
C	under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and	1	
	allocation of the basis adjustment. See instructions		x
40	Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such		
13	property to another entity (other than entities wholly-owned by the partnership throughout the tax year)		
	At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership		
14			х
	property?  If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign Disregarded Entities, enter the		
15	number of Forms 8858 attached. See instructions		1.
40	Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of		
16	Section 1446 Withholding Tax, filed for this partnership.		X
477	Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return.		<u> </u>
<u>17</u>	gnation of Tax Matters Partner (see instructions)	······································	
	below the general partner designated as the tax matters partner (TMP) for the tax year of this return:		
Name design	of number of TMP number of TMP		
If the	TMP is an		
entity.	name of TMP number of TMP		
	TOTAL CONTROL OF THE		
Addre desiar	ss of hated TMP		
Joseph	Form	1065	(2009)

Form 1	065 (	2009) REPUBLIC GROUP, LLC			83	-0396188 Page	4
Scl	ed.	ule K Partners' Distributive Share Items				Total amount	
	1	Ordinary business income (loss) (page 1, line 22)			1	6,751	•
	2	Net rental real estate income (loss) (attach Form 8825)			2		
	2	a Other gross rental income (loss)	3a				
	3 (	Expenses from other rental activities (attach statement)	3b				
		c Other net rental income (loss). Subtract line 3b from line 3a	[		3c	İ	
		•			4		_
SS	l	Guaranteed payments			5		
Ä	5	Interest income			6a		_
<u>e</u>	6	Dividends: a Ordinary dividends	l as l		Da		
ncome (Loss)		b Qualified dividends			_		
<u>=</u>	7	Royalties			7	<u> </u>	—
	8	Net short-term capital gain (loss) (attach Schedule D (Form 1065))					
		Net long-term capital gain (loss) (attach Schedule D (Form 1065))			9a		
	ı	b Collectibles (28%) gain (loss)	9b				
	,	Unrecaptured section 1250 gain (attach statement)	9c				
	10	Net section 1231 gain (loss) (attach Form 4797)		,	10		
	11	Other income (loss) (see instructions) Type			11		_
	12	Section 179 deduction (attach Form 4562)			12		
Deductions	13 :	a Contributions			13a		
ŧ	ا       ا	b Investment interest expense			13b		
큣		Section 59(e)(2) expenditures: (1) Type ▶			13c(2)		
ă		1 Other deductions (see instructions) Type			13d		
٠.٠		Net earnings (loss) from self-employment			14a	0	) .
Employ- ment	l '''	Gross farming or fishing income			14b		
αËĖ	'	Gross nonfarm income			14c		
		Low-income housing credit (section 42(j)(5))			15a		
	ı	b Low-income housing credit (other)	15b				
3			15c				
Credits		c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468) d Other rental real estate credits (see instructions)  Type  Type  Type			15d		
Ö		Other restal cradite (see instructions)			15e		
	!	Other rental credits (see instructions)  Type		······································	15f		
		Other credits (see instructions)  Type			*		
	1	Name of country or U.S. possession					
	•	Gross income from all sources					
Ø	•	Gross income sourced at partner level			16c		—
ıctions		Foreign gross income sourced at partnership level					
	•	Passive e General category		f Other			
ans		Deductions allocated and apportioned at partner level					
Ë	(			<b>&gt;</b>	16h		
Foreign Transa		Deductions allocated and apportioned at partnership level to foreign					
ore	i	category Cieneral category	· · · · · · · · · · · · · · · · · · ·	k Other ►	16k		
ĬĪ.	ı				<u> 161</u>		
	ľ	n Reduction in taxes available for credit (attach statement)			16m	No. 1 (2002) No. 2 (2004) No. 2 (2004)	<del></del>
	1	1 Other foreign tax information (attach statement)			No.		<u>. :</u>
	17 8	Post-1986 depreciation adjustment			17a		
Alternative Minimum Tax (AMT) Items	t	Adjusted gain or loss			17b		
돌	C	Depletion (other than oil and gas)	.,		17c	<u> </u>	
EEE		l Oil, gas, and geothermal properties - gross income		***************************************	17d		
E E	e	Oil, gas, and geothermal properties - deductions			17e_		
~		Other AMT items (attach statement)	•		17f		
		Tax-exempt interest income			18a		
_		Other tax-exempt income			18b		
Other Information		Nondeductible expenses S			18c	6,349	<u>,                                     </u>
E		n Distributions of cash and marketable securities			19a		
ğ					19b		
든		Distributions of other property			20a '		
Ę.		Investment income			20b		_
ō		Investment expenses			200		
	C	Other items and amounts (attach statement)				Form <b>1065</b> (200	

Analysis of Net									C 751
1 Net income (loss). Comb	bine Schedule K, lines 1 thro			t the sum	of Schedule K	Lines 12 through	13d, and 16l		6,751.
2 Analysis by	(Carporate		idividual		idividual	(iv) Partr	nershin	(v) Exempt	(vi) Nominee/Other
partner type:	(i) Corporate	(a	ctive)	(pa	ssive)	(14)1 (11)	ioramp	organization	(.,,
a General partners									
b Limited partners					6,751	•			
Schedule L	<b>Balance Sheets</b>	per Bo	oks						
	Assets	ļ	8	eginning	of tax year			End of ta	
	Assers		(a)			(b)		(c)	(d) 1 21 2
1 Cash						916	•	<u> </u>	1,318.
	accounts receivable				· × .		·		
b Less allowance f	for bad debts					·			
3 Inventories							·		
4 U.S. government	t obligations			4°.			<u> </u>		
	urities						_		
	sets (attach statemen		•				_	* . ·	
	al estate loans						_		
	ts (attach statement)			,			-	-	
	her depreciable assets		<u></u>				<u> </u>		
	ed depreciation					77 E. W. 1 57 G. L.			
	s		<del> </del>			34.3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	ļ		
	ed depletion	1	N N N N N N N N N N N N N N N N N N N		<b> </b>				
•	amortization)		100	. ·				· ·	
· · · · · · · · · · · · · · · · · · ·	s (amortizable only)				5 V; 5				
	ed amortization								400 000
	tach statement)		'ATEMENT	4,		419,870		tani, system s	480,270.
				\$ <b>1</b> , 11, 1		420,786			481,588.
Liabilit	ies and Capital	ľ.		[1] 					dia dia mandra dia man
15 Accounts payabl	e		ilija Byrodiji						
16 Mortgages, notes, b	oonds payable in less than 1	1 year					_		
	bilities (attach stateme			The second			_		·
18 All nonrecourse l	loans	· · · .							
19 Mortgages, notes, b	oonds payable in 1 year or n								EEC 000
	attach statement)		ATEMENT	<b>.</b> 5		496,430			556,830.
	accounts			4 ¥		<75,644			<75,242.
22 Total liabilities an	nd capital	<u>   ::::</u>	<u> </u>	<u> </u>	<u> </u>	420,786		<b>B</b> •	481,588.
Schedule M-1	Reconciliatio							per Return	
	Note. Schedule	vi-3 may b	e required insi			<del></del>		his year not included	
1 Net income (loss	• • • • • • • • • • • • • • • • • • • •		<b> </b>	40	<del></del>			-	
	on Schedule K, lines 1,				- 1			gh 11 (itemize):	
	), and 11, not recorded				a 12	ix-exempt anere	≲ાૐ		
	);	<del></del>	<del></del>		, <sub>D</sub>	ductions includ	od on Scho	dula K lings 1	
	ents (other than health				E .	rough 13d, and		•	
insurance)	d on books this year no		<del> </del>			ook income this	-		
		ı						26).	
	fule K, lines 1 through					preciation w_			
13d, and 16l (item	•				-				
<ul> <li>a Depreciation \$</li> <li>b Travel and entertai</li> </ul>		,349.	İ		9 00	Id linge 6 and 7			
b Traverano emena	illilient \$O	, 343.		6 3/				et Income (Loss),	· · · · · · · · · · · · · · · · · · ·
E Add lines 1 through	ıh 4			$\frac{6,34}{6,75}$				ine 5	6,751.
	Analysis of P					v 17. oubliact III		1	
	ng of year					stributions* • C	ash		
	i: a Cash			<u>,, , , 4</u>	- PU UI				
Z Vapital continuoted					7 0+				
A Natingama (local)	<b>b</b> Property		Į.	40		nor neolegaes (I			
	per booksemize):			<del>-</del> ≢∪	<b>-</b> -				
4 Uniti niti tases (ili	GIIII26).				R De	d lines 6 and 7			
E Add lines 1 through	h /		<i>-</i> 7	5 24				ine 8 from line 5	<75,242.

### SCHEDULE B-1 (Form 1065)

(December 2009)
Department of the Treasury
Internal Revenue Service

# Information on Partners Owning 50% or More of the Partnership

► Attach to Form 1065. See instructions.

OMB No. 1545-0099

Name of partnership

Employer identification number

REPUBLIC GROUP, LLC			83	3-0396188
Part I Entities Owning 50% or More of	of the Partnership (Form	1065, Schedule B,	Question 3a)	
Complete columns (i) through (v) below for any foreign tax-exempt organization that owns, directly or indirect	or domestic corporation, par ly, an interest of 50% or more	tnership (including a	ny entity treated as a parti r capital of the partnership	nership), trust, or (see instructions).
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
		<del></del>		
Part II Individuals or Estates Owning	50% or More of the Pa	artnership (Form	1065, Schedule B, Questio	n 3b)
Complete columns (i) through (iv) below for any individual capital of the partnership (see instructions).	iual or estate that owns, direc	ctly or indirectly, an i	nterest of 50% or more in	the profit, loss, or
(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citi	zenshìp (see instructions)	(iv) Maximum Percentage Owned in Profit, Loss, or Capital
RAFAEL MARTINEZ	091-58-9756	UNITED ST	ATES	95.00
		:		
LIA For Benerwork Reduction Act Notice see the	Instructions for Form 1065		Schedule B-1 (F	orm 1065) (12-2009)

FORM 1065 TAX EXPENSE			STATEMENT	1
DESCRIPTION	- 11		AMOUNT	
PAYROLL TAXES			10,6	63.
TOTAL TO FORM 1065, LINE 14			10,6	63.
FORM 1065 OTHER DEDUCTION	ons		STATEMENT	2
DESCRIPTION			AMOUNT	
BANK SERVICE CHARGES INSURANCE MEALS AND ENTERTAINMENT OFFICE EXPENSE PROFESSIONAL FEES SUNDRY TRAVEL UTILITIES	:		1,5 5,8 6,3 16,2 36,3 8,5 2,2	42. 50. 60. 41. 63.
TOTAL TO FORM 1065, LINE 20			78,2	01.
SCHEDULE K NONDEDUCTIBLE EXI	PENSI	3	STATEMENT	3
DESCRIPTION			AMOUNT	
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES			6,3	49.
TOTAL TO SCHEDULE K, LINE 18C	-		6,3	49.
SCHEDULE L OTHER ASSETS			STATEMENT	4
DESCRIPTION		BEGINNING OF TAX YEAR	END OF TA YEAR	x
DUE FROM PARTNERS	* •	419,870.	480,2	70.
TOTAL TO SCHEDULE L, LINE 13		419,870.	480,2	70.

SCHEDULE	L	OTHER I	IABILITIES		STATEMENT 5
DESCRIPTI	ON			BEGINNING OF TAX YEAR	END OF TAX YEAR
LOANS - C	 OTHERS		• :	496,430.	556,830.
TOTAL TO	SCHEDULE L, LI	•	496,430.	556,830.	
FORM 1065	; Pi	ARTNERS' CAPI	TAL ACCOUNT S	UMMARY	STATEMENT 6
PARTNER NUMBER	BEGINNING CAPITAL	CAPITAL CONTRIBUTED	SCHEDULE M- LNS 3, 4 &		ENDING CAPITAL
				7 DRAWALS	
NUMBER	CAPITAL		LNS 3, 4 &	7 DRAWALS	CAPITAL

Schedule K-1 (Form 1065) For calendar year 2009, or tax	Final K-1 Amend	e of Current Year Income,
Department of the Treasury year beginning	1 Ordinary business income (loss)	edits, and Other Items 15 Credits
Partner's Share of Income, Deductions,	6,413.	,
Credits, etc.	2 Net rental real estate income (loss)	
See separate instructions.		16 Foreign transactions
Part I Information About the Partnership	3 Other net rental income (loss)	
A Partnership's employer identification number 83-0396188	4 Guaranteed payments	
B Partnership's name, address, city, state, and ZIP code	5 Interest income	
REPUBLIC GROUP, LLC 260 WEST 36TH STREET, SUITE 901 NEW YORK, NY 10018	6a Ordinary dividends  6b Qualified dividends	17 Alternative min tax (AMT) items
C IRS Center where partnership filed return		
CINCINNATI, OH	7 Royalties	18 Tax-exempt income and
D Check if this is a publicly traded partnership (PTP)	8 Net short-term capital gain (loss)	nondeductible expenses  C* 6,032.
Part II Information About the Partner	9a Net long-term capital gain (loss)	
E Partner's identifying number 091-58-9756	9b Collectibles (28%) gain (loss)	19 Distributions .
F Partner's name, address, city, state, and ZIP code	9c Unrecaptured sec 1250 gain	20 Other information
RAFAEL MARTINEZ 300 HOPPER COURT	10 Net section 1231 gain (loss)	20 Otter information
FRANKLIN LAKES, NJ 07417	11 Other income (loss)	
G General partner or LLC X Limited partner or other LLC	]   ' '	
member-manager member		
H X Domestic partner Foreign partner		
What type of entity is this partner?INDIVIDUAL	12 Section 179 deduction	
J Partner's share of profit, loss, and capital:	13 Other deductions	
Beginning Ending	13 Other deductions	
Profit 95.000000% 95.000000%		
Loss 95.000000% 95.000000%		
Capital 95.000000% 95.000000%	14 Self-employment earnings (loss)	
	A 0.	
Nonrecourse \$		
Qualified nonrecourse financing \$	*See attached statement for addition	onal information.
Recourse \$ 0.		
		,
L Partner's capital account analysis:		
L Partner's capital account analysis:   Beginning capital account	<b>≥</b>	
Capital contributed during the year \$	5	
Current year increase (decrease) \$ 381.	se se	
Withdrawals & distributions \$()	່ວ	
Ending capital account \$ <71,481.	RI Yo	
X Tax basis GAAP Section 704(b) book Other (explain)	<b>*-</b>	
M Did the partner contribute property with a built-in gain or loss?  X No	++	
If "Yes", attach statement (see instructions)		THE COUNTRY OF
911281 12-08-09 LHA For Paperwork Reduction Act Notice, see Instructions for Form 1065.	ę* - \$ - \$	Schedule K-1 (Form 1065) 2009

SCHEDULE K-1 NONDEL	OUCTIBLE EXPENSES, BOX 18, CODE C	
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	NONDEDUCTIBLE PORTION	6,032.
TOTAL TO SCHEDULE K-1, BOX	18, CODE C	6,032.

Partner's Share of Income, Deductions, Credits, etc.  See separate instructions. Part I Information About the Partnership  8 a - 3.9 6 1.8 8  8 Partnership's ramely seriodistication number 8.3 - 3.9 6 1.8 8  8 Partnership's ramely seriodistication number 8.3 - 3.9 6 1.8 8  8 Partnership's ramely seriodistication number 8.3 - 3.9 6 1.8 8  8 Partnership's ramely seriodistication number 8.3 - 3.9 6 1.8 8  8 Partnership's ramely seriodistication number 8.3 - 0.3 9 6 1.8 8  8 Partnership's ramely seriodistication number 8.3 - 0.3 9 6 1.8 8  8 Partnership's ramely seriodistication number 8.3 - 0.3 9 6 1.8 8  8 Partnership's ramely seriodistication number 8.3 - 0.3 9 6 1.8 8  8 Partnership's ramely seriodistication number 8.3 - 0.3 9 6 1.8 8  8 Partnership's ramely and seriodistication number 8.4 Contained payments 9 Collectification number 9 Collectification number 9 Collectification number 9 Collectification number 9 Republic of State seriodistication number 9 Collectification number 10 Canada number 10 Canada number 11 Collectification number 12 Section 123 I guin (loss) 13 Distributions 14 Self-employment courrings (loss) 15 Distributions 16 Forcign transactions 17 Alternative number 18 Not started transactions (Anti) homes 18 Not started transactions 17 Alternative number 19 Collectifications	Schedule K-1 (Form 1065) For calendar year 2009, or tax	Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items
Credits, etc.  Se separate instructions.  A Partmership's employer identification number  33 - 0.39 51.88  B Partmership's employer identification number  38 - 0.39 51.88  B Partmership's employer identification number  39 - 0.39 51.88  B Partmership's employer identification number  20 - 0.60 WEST 36TH STREET, SUITE 901  NEW YORK, NY 10018  CINCINNATI, OH  D Check if this is a publicity traded partmership (PTP)  Part II Information About the Partner  E Partner's identifying number  I Wind type of entity is this partner?	Internal Revenue Service	1 Ordinary business income (loss) 15 Credits
See septrate instructions   16 Feeding transactions   16 Feeding transactions   17 Percental income (loss)   17 Percental income (loss)   18 Percental income (loss)   18 Percental income (loss)   18 Percental income (loss)   18 Percental income (loss)   19 Percental income (loss)   19 Percental income (loss)   19 Percental income (loss)   19 Percental income (loss)   19 Percental income (loss)   19 Percental income (loss)   19 Percental income (loss)   19 Percental income (loss)   19 Percental income (loss)   19 Percental income (loss)   19 Percental income (loss)   17 Percental income (loss)   17 Percental income (loss)   17 Percental income (loss)   18 Percental income (loss)   18 Percental income (loss)   19 Percental income (	Partner's Share of Income, Deductions,	338.
Part I Information About the Partnership  A Partnership's employer identification number  3 - 0 396188  B Partnership's mane, address, city, stata, and ZIP code  REPUBLIC GROUP, LLC 260 WEST 36TH STREET, SUITE 901 NEW YORK, NY 10018  C INSCRIPTION AND 10018  C INSCRIPTIN	Credits, etc.	· · · · · · · · · · · · · · · · · · ·
A Partnership's employer identification number 3 3-0396188  B Partnership's mane, address, city, stath, and 2IP code  REPUBLIC GROUP, LLC 66 WEST 36TH STREET, SUITE 901  NEW YORK, NY 10018  C INS Contex where partnership fled return  CTNCTNNATI, OH  D Check if this is a publicly waded partnership (PTP)  Part II Information About the Partner  E Partner's identifying number 263-81-0455  F Partner's mane, address, city, stath, and 2IP code  INA SAMUELS MARTINEZ 300 HOPPER COURT  FRANKLIN LAKES, NJ 07417  B C Glorel partner or LLC  member HX Domestic partner  I What type of entity is this partner?  I What type of entity is this partner?  I What type of entity is the partner?  Portit 5 0.000000%  S 0.000000%  Cogoda 5 0.000000%  S 0.000000%  Cogoda 5 0.000000%  F Portner's share of liabilities at year end: Nonrecoruse financing  Recoruse  S 0.4  L Partner's capital account  S 23, 782- Capital concilibuted during the year  Complete more see (effects ass)  S 21 - 3  Withdrawaks & distributions  S 12 - 3  C S Interest income  4 Cuinary divide ends  6a Crolnary dividends  6a C	See separate instructions.	
8 3-0396188 8 Partnership's name, address, city, state, and ZIP code  REPUBLIC GROUP, LLC 260 WEST 367H STREET, SUITE 901 NEW YORK, NY 10018  D Check it this is a publicly traded partnership (PTP)  D Check it this is a publicly traded partnership (PTP)  Part II Information About the Partner  E Partner's identifying number 263-81-0455 F Partner's name, address, city, state, and ZIP code  INA SAMUELS MARTINEZ 300 HOPPER COURT FRANKLIN LARES, NJ 07417 G Seeral partner of the CIX Limited partner or other LLC member member partnership ship partner?  I What type of entity is file partner?  I What type of entity is file partner?  I What type of entity is file partner?  I What type of entity is file partner?  I What type of entity is file partner?  I What type of entity is file partner?  S 0.000000%  K Partner's share of profit, loss, and capital:  Beginning Froffit 5.0000000%  K Partner's share of labilities at year and:  Norrocourse  Qualified dividends  17 Alternative min tax (AMT) items on condeductible expenses  C* 317.  9a Net long-term capital gain (loss)  15 Distributions  16 Unrecaptured see 1250 gain  20 Cither information  10 Net section 1231 gain (loss)  11 Other income (loss)  11 Other income (loss)  11 Other income (loss)  11 Other income (loss)  12 Section 179 deduction  13 Other deductions  14 Self-employment earning (loss)  A See attached statement for additional information.  15 See attached statement for additional information.  16 See attached statement for additional information.	Part I Information About the Partnership	
REPUBLIC GROUP, LIC 260 WEST 36TH STREET, SUITE 901 NEW YORK, NY 10018  © IIS Center where partnership fled return CINCINNATI, OH  D Check if this is a publicly traded partnership (FTP)  Part II Information About the Partner  E Partner's identifying number 263-81-0455 F Partner's fame, address, city, state, and ZIP code  INA SAMUELS MARTINEZ 300 HOPPER COURT FRANKLIN LARES, NJ 0741.7 G G General partner or LC member-manager I What type of entity is this partner? INDIVIDUAL J Partner's share of liabilities at year end; Nemerocrose Nemerocrose Nemerocrose Nemerocrose Recourse Squalities  13 Other deductions  14 Atternative min tax (AMT) items  45 Not short-term capital gain (loss) 15 Tax-exempt income and nonadeductible expenses 10 Cx 31.7.  9a Not long-term capital gain (loss) 11 Other income (loss) 12 Outher information 10 Net section 1231 gain (loss) 11 Other income (loss) 11 Other income (loss) 12 Section 179 deduction 13 Other deductions 13 Other deductions 15 Other deductions 16 Value arrives are arriving (loss) 17 Atternative min tax (AMT) items 18 Tax-exempth leaves and nonadeductible expenses 2 Cx 31.7. 31.7. 31.7. 31.7. 32. Value income and nonadeductible expenses 2 Cx 31.7. 31.7. 32. Value income and nonadeductible expenses 31.7. 31.7. 32. Value income and nonadeductible expenses 31.7. 31.7. 32. Value income and nonadeductible expenses 31.7. 31.7. 32. Value income and nonadeductible expenses 31.7. 32. Value income and nonadeductible expenses 31.7. 32. Value income and nonadeductible expenses 31.7. 32. Value income and nonadeductible expenses 31.7. 32. Value income and nonadeductible expenses 31.7. 32. Value income and nonadeductible expenses 31.7. 32. Value income and nonadeductible expenses 31.7. 32. Value income and nonadeductible expenses 31.7. 32. Value income and nonadeductible expenses 31.7. 32. Value income and nonadeductible expenses 31.7. 32. Value income and nonadeductible expenses 31.7. 33.7. 34. Value income and nonadeductible expenses 31.7. 35. Value income and nonadeductible expenses 31.7		4 Guaranteed payments
260 WEST 36TH STREET, SUITE 901 NEW YORK, NY 10018  6 Dustified dividends  7 Royalties  17 Alternative min tax (ANT) items  8 Nat short-term capital gain (loss)  18 Tax-exempt income and nondeductible expenses  2	B Partnership's name, address, city, state, and ZIP code	5 Interest income
Collective where partnership filed return   CINCINNATI, OH   To Check if this is a publicly traded partnership (PTP)   Set at short-term capital gain (loss)   18 Tax-exempt income and nondeductible expenses   3.17 .	260 WEST 36TH STREET, SUITE 901	17 Alternative min tax (AMT) items
D   Check if this is a publicly traded partnership (PTP)   8 Net short-term capital gain (loss)   18 Tax-exempt income and nondeductible expenses   2x   31.7 .		
D Check it this is a publicly traded partnership (PTP)  Part II Information About the Partner  E Partner's identifying number 263-81-0455  F Partner's name, address, city, state, and ZIP code  INA SAMUELS MARTINEZ 300 HOPPER COURT FRANKLIN LARES, NJ 07417  a General partner or LLC member-manager  I What type of entity is this partner? INDIVIDUAL  J Partner's share of profit, loss, and capitat:  Beginning Profit 5.000000% 5.000000%  Loss 5.000000% 5.000000%  K Partner's share of liabilities at year end:  Nonrecourse Qualified nonrecourse financing \$ Qualified nonrecourse financi	CINCINNATI, OH	
E Partner's identifying number 263 = 81 - 0455  F Partner's name, address, city, state, and ZIP code  INA SAMUELS MARTINEZ 300 HOPPER COURT FRANKLIN LAKES, NJ 07417  G G eneral partner or LLC member-manager member Foreign partner  I What type of entity is this partner? INDIVIDUAL 12 Section 179 deductions  Beginning Profit 5 . 0 0 0 0 0 0 0 % 5 . 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	D Check if this is a publicly traded partnership (PTP)	8 Net short-term capital gain (loss) nondeductible expenses
Partner's name, address, city, state, and ZIP code	Part II Information About the Partner	9a Net long-term capital gain (loss)
F Partner's name, address, city, state, and ZIP code  INA SAMUELS MARTINEZ 300 HOPPER COURT FRANKLIN LAKES, NJ 07417  G General partner or LLC member-manager H XI Domestic partner I What type of entity is this partner? I What type of entity is this partner? I Seginning Profit 5.0000000% Loss 5.0000000% Loss 5.000000% Sequital 5.000000% Sequital 5.000000% K Partner's share of liabilities at year end: Nonrecourse Qualified nonrecourse financing Recourse Seginning capital account Seginal count sequital se		9b Collectibles (28%) gain (loss) 19 Distributions
INA SAMUELS MARTINEZ   300 HOPPER COURT   FRANKLIN LAKES, NJ 07417   11 Other income (loss)   11 Other income (loss)   12 Section 179 deduction   12 Section 179 deduction   13 Other deductions   13 Other deductions   14 Self-employment earnings (loss)   15 Other deductions   15 Other deductions   15 Other deductions   16 Other deductions   17 Other deductions   18 Other		
FRANKLIN LAKES, NJ 07417   G   General partner or LLC   Mainted partner or other LLC   member-manager   member   member   member   Foreign partner		<del> </del>
G General partner or LLC member-manager member   Foreign partner   Foreign partner   Foreign partner   Foreign partner   What type of entity is this partner?		
Market   M		11 Other income (loss)
H   X   Domestic partner	<del>* </del>	
What type of entity is this partner?		
J   Partner's share of profit, loss, and capital:   Beginning	1 " <del></del>	12 Section 179 deduction
Beginning   Ending   S		
Profit	1 '	13 Other deductions
Loss 5.000000% 5.000000% Capital 5.000000% 5.000000% K Partner's share of liabilities at year end: Nonrecourse Qualified nonrecourse financing \$ Recourse \$  Under some sequence of liabilities at year end: Recourse \$  Under some sequence of liabilities at year end: Recourse \$  Under some sequence of liabilities at year end: Recourse \$  Under some sequence of liabilities at year end: Recourse \$  Under some sequence of liabilities at year end: Recourse \$  Under some sequence of liabilities at year end: See attached statement for additional information.  *See attached statement for additional information.	1	
Capital		
K Partner's share of liabilities at year end: Nonrecourse Qualified nonrecourse financing Recourse S Qualified nonrecourse financing Recourse S Q  L Partner's capital account analysis: Beginning capital account Capital contributed during the year Current year increase (decrease) S Withdrawals & distributions Ending capital account S Carrent year increase (decrease) S Carrent year increase (decrease	****	14 Salf-amployment earnings (loss)
Nonrecourse \$ Qualified nonrecourse financing \$		
Accourse   See attached statement for additional information.		
Recourse \$ 0.  L Partner's capital account analysis:  Beginning capital account \$ <3,782.  Capital contributed during the year \$  Current year increase (decrease) \$ 21.  Withdrawals & distributions \$  Ending capital account \$ <3,761.  X Tax basis GAAP Section 704(b) book  Other (explain)  M Did the partner contribute property with a built-in gain or loss?  Yes X No  If "Yes", attach statement (see instructions)		*See attached statement for additional information.
Ending capital account \$ <a><a><a><a><a><a><a><a><a><a><a><a><a>&lt;</a></a></a></a></a></a></a></a></a></a></a></a></a>	1	
Ending capital account \$ <a><a><a><a><a><a><a><a><a><a><a><a><a>&lt;</a></a></a></a></a></a></a></a></a></a></a></a></a>		
Ending capital account \$ <a><a><a><a><a><a><a><a><a><a><a><a><a>&lt;</a></a></a></a></a></a></a></a></a></a></a></a></a>	L Partner's capital account analysis:	
Ending capital account \$ <a><a><a><a><a><a><a><a><a><a><a><a><a>&lt;</a></a></a></a></a></a></a></a></a></a></a></a></a>	Beginning capital account \$ <3,782.	No.
Ending capital account \$ <a><a><a><a><a><a><a><a><a><a><a><a><a>&lt;</a></a></a></a></a></a></a></a></a></a></a></a></a>	Capital contributed during the year	Se C
X Tax basis GAAP Section 704(b) book  Other (explain)  M Did the partner contribute property with a built-in gain or loss?  Yes X No  If "Yes", attach statement (see instructions)	Current year increase (decrease) 5 41 •	ο Θ
Other (explain)  M Did the partner contribute property with a built-in gain or loss?  Yes  If "Yes", attach statement (see instructions)		RI VOI
Yes X No If "Yes", attach statement (see instructions)	Other (explain)	
	Yes X No	
	If "Yes", attach statement (see instructions) 917281 12-08-09 LHA For Paperwork Reduction Act Notice, see Instructions for Form 1065.	Schedule K-1 (Form 1065) 200

SCHEDULE K-1 NONDEDU	CTIBLE EXPENSES, BOX 18, CODE C	
DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES	NONDEDUCTIBLE PORTION	317.
TOTAL TO SCHEDULE K-1, BOX 1	18, CODE C	317.

# 2009 TAX RETURN FILING INSTRUCTIONS

LLC/LLP FILING FEE FORM IT-204-LL

### FOR THE YEAR ENDING

DECEMBER 31, 2009

Prepared for	
	REPUBLIC GROUP, LLC 260 WEST 36TH STREET, SUITE 901 NEW YORK, NY 10018
Prepared by	•
	SANSIVERI, LONG & CO., L.L.C. 1135 CLIFTON AVENUE SUITE 101 CLIFTON, NJ 07013
To be signed and dated by	A MEMBER OF THE LLC
Amount of tax	BALANCE DUE \$26.00
Mail tax return to	STATE PROCESSING CENTER PO BOX 22076 ALBANY, NY 12201-2076
Forms to be distributed to partners	NONE
Return must be mailed on or before	OCTOBER 31, 2010
Special Instructions	MAKE CHECK PAYABLE TO NYS FILING FEE.
	INCLUDE THE EMPLOYER IDENTIFICATION NUMBER, AND THE WORDS "2009 FILING FEE" ON THE CHECK.
	·

### New York State Department of Taxation and Finance Partnership, Limited Liability Company, and

Filing Fee Payment Form

IT-204-LL

and ending

Employer identification number (EIN)

2009

Legal name

**Limited Liability Partnership** For calendar year 2009 or fiscal year

beainning

83-0396188 REPUBLIC GROUP, LLC Change of business information Trade name of business if different from legal name above Mark X here if you have changed your mailing address and have not previously notified us (see inst) Address (number and street or rural route) Date business started 01-16-2004260 WEST 36TH STREET, SUITE 901 Contact person's telephone number ZIP code State City, village, or post office NY 10018 NEW YORK Enter your 2-digit special condition Principal business activity code if applicable (see instructions) ..... . ... REAL ESTATE INVESTMENTS Mark an X in the box identifying the entity for which you are filing this form (mark only one box): Regular partnership X Limited liability company (LLC) or limited liability partnership (LLP) 26. \*BALANCE DUE Part 1 - General information (mark an X in the appropriate box) Did this entity have any income, gain, loss, or deduction derived from New York sources during Yes X No the tax year? No \_\_\_\_ Did this entity have an interest in real property in New York State during the last three years? Yes No Has there been a transfer or acquisition of the controlling interest in the entity during the last three years? If you answered No to question 1, stop; you do not owe a fee. Do not file this form. Part 2 - Partnerships, and LLCs and LLPs treated as partnerships for federal income tax purposes Enter the amount from line 15, column B, of the New York source gross income worksheet in 0. the instructions \_\_\_\_\_ 25. NYS filing fee - Enter the amount from the appropriate filing fee table in the instructions Make check or money order for the line 5 amount payable to NYS filing fee; write your EIN and 2009 filing fee on the remittance and staple it to the top of this form. Part 3 - LLCs that are disregarded entities for federal income tax purposes LLC disregarded entity: Enter the identification number (EIN or SSN) of the entity or individual who will be reporting the income or loss LLC disregarded entity NYS filing fee - Enter 25 on this line Make check or money order for \$25 payable to NYS filing fee; write your EIN or SSN and 2009 filing fee on the remittance and staple it to the top of this form. Certification: I certify that all information contained on this form is true and correct to the best of my knowledge and belief. Paid preparer must complete (see instructions) ▼ Sign here Date: Signature of general partner SSN or PTIN: Preparer's signature P00009773 Employer identification number Firm's name (or yours, if self-employed) 22-3769808 Telephone number Date SANSIVERI, LONG & CO., L.L.C. Mark an X if self-employed

File this form with payment within 30 days after the last day of the tax year (see instructions). Mail to: STATE PROCESSING CENTER, PO BOX 22076, ALBANY NY 12201-2076. For private delivery services, see instructions.

1135 CLIFTON AVENUE SUITE 101



E-mail:

CLIFTON, NJ

07013

### 2009 TAX RETURN FILING INSTRUCTIONS

NEW YORK CITY FORM NYC-204-EZ

### FOR THE YEAR ENDING

DECEMBER 31, 2009

Prepared for	
	REPUBLIC GROUP, LLC 260 WEST 36TH STREET, SUITE 901 NEW YORK, NY 10018
Prepared by .	
	SANSIVERI, LONG & CO., L.L.C. 1135 CLIFTON AVENUE SUITE 101 CLIFTON, NJ 07013
To be signed and dated by	A MEMBER OF THE LLC
Amount of tax	NOT APPLICABLE
Mail tax return to	NYC DEPARTMENT OF FINANCE P.O. BOX 5060 KINGSTON, NY 12402-5060
Forms to be distributed to partners	ENCLOSED ARE COPIES OF SCHEDULE K-1 TO BE DISTRIBUTED TO THE MEMBERS.
Return must be mailed on or before	OCTOBER 15, 2010
Special Instructions	
·	·
	·
:	

### NYC UNINCORPORATED BUSINESS TAX RETURN FOR PARTNERSHIPS (INCLUDING LIMITED LIABILITY COMPANIES)

**FINANCE** 204 NEW • YORK THE CITY OF NEW YORK DEPARTMENT OF FINANCE nyc.gov/finance \_, and ending \_ For CALENDAR YEAR 2009 or FISCAL YEAR beginning general partnership • \_\_\_\_\_ registered limited liability partnership • \_\_\_\_\_ limited partnership • \_\_\_\_\_ limited liability company Entity Type: • • \_\_\_\_ Final return -Check this box if you have ceased operations. \_\_\_ Amended return Check box if you are engaged in an exempt unincorporated business activity Check box if you claim any 9/11/01-related federal tax benefits (see inst.) Date business ended Date business 01-16-04 in NYC: (if applicable): began in NYC: MM-DD-YY

IF BUSINESS TERMINATED DURING THE YEAR, ATTACH A STATEMENT SHOWING THE DISPOSITION OF BUSINESS PROPERTY EMPLOYER IDENTIFICATION NUMBER Name 83-0396188 REPUBLIC GROUP, LLC Address (number and street) 260 WEST 36TH STREET, City and State BUSINESS CODE NUMBER

		NEW YORK		NY 10018		AS PER FEDERAL RETURN			
		Business Telephone Number	Nature of Business			531390			
		·							
			amounted as partnerships for factor	ral income tax purposes, who	are required to fi	file an Unincorporated Business Tax Return			
ti bi ur sc	This form is for certain partnerships, including limited liability companies treated as partnerships for federal income tax purposes, who are required to file an Unincorporated Business Tax Return but have no tax liability. For taxable years beginning on or after January 1, 1997, a partnership engaged in an unincorporated business is required to file an Unincorporated Business Tax return if its unincorporated business gross income is more than \$95,000. This form may also be used by a partnership that is not required to file but wishes to disclaim any liability for tax because it is engaged solely in activities exempt from the tax.								
Y									
•	You have NYC m	odifications other than the addbast st of modifications, see instruction	ck of income and Unincorporated B	Relifere 1 axes on ochego	16 B, 1116 10 0	011 01111 1410 20 14			
_	Maria alla andra dede	thusiassa insome within and wit	sout NVC (If you allocate 100% of y	our business income to I	√YC, you may	use this form.)			
•	Vou alaim a crad	it for Linincornorated Business T:	ry Paid (See Form NYC-114.7) or of	her credits (see Forms N)	(C-114.5, NY L	C-114.6, NYC-114.8 or NYC-114.9).			
•	Vou člaim a parti	al exemption for investment activ	ities. (See instructions to Form NYC	-204 "Who is Subject to t	ne (ax.)				
•	You have any inv	restment income. (See instruction	ns for Form NYC-204, Schedule D.) (See Form NYC-204, Schedule A, lir	ne 11 \					
•	You claim any us	ated business aross income less	the allowance for active partners' se	rvices is more than \$90,0	000. (See Forr	m NYC-204, Schedule A, line 14.)			
_									
1.	Amount from A	nalysis of Net Income (Loss)	from federal Form 1065, Sched	ule K, line 1		• 1. <u>6751</u>			
2.	Other income	and evacances not included or	n line 1 that are required to be re	eported					
	separately to p	artners (attach schedule and	see instructions)			● 2.			
3.	Income taxes a	and Unincorporated Business	Tax deducted on federal Form	1065					
	(attach list and	see instructions)				• 3. • 4. 6751			
4.	Total Income	(add lines 1 through 3)				• 4. <u>0131.</u>			
5.	Amount include	ed in line 4 representing net i	ncome or loss from activities ex	empt from the tax (see	instr.)	• 5. • 6. 6751			
6.	Subtract any n	et income on line 5 from, or a	dd any net loss on line 5 to, line	4 amount		' ''			
7.	Allowance for a	active partners' services (see	instructions) Number of active p			F 4 0 3			
8.	Line 6 minus lir	ne 7	***************************************	••••••					
9.	Enter the numb	per of months in business in l	NYC during the tax year			• 9. <u>12.</u>			
0.	Enter the maxim	um total allowed income from tat	le on page 2 based on the number (	of months on line 9. If the	amount on	●10. 90000			
	line 8 exceeds t	he amount on line 10 by more ti	an \$100 you cannot use this form;	- you must file on Form	NYC-204	●10. <u>30000</u>			
1.	Enter payment	of estimated Unincorporated	Business Tax including carryov	er credit from		~ 44			
	previous year a	and payment with extension,	NYC-EXT. This amount is your o	verpayment		•11.			
2.	Amount of line	11 to be refunded				•12.			
3.	Amount of line	11 to be credited to 2010 es	timated tax on form NYC-5UB			• 13.			
4.	NYC rent dedu	cted on Federal return		₱14	5833.	<u>.</u>			
_	I hereby o	ertify that this return, including any acc	companying rider, is, to the best of my kno aturn with the preparer listed below. (see in	wledge and belief, true, correc	t and complete.	· · · · · · · · ·			
	I authorize	the Dept. of Finance to discuss this re	aturn with the preparer listed below. (see in	structions)		YES A.			
z	SIGN Signatu	re.	ŀ	ŀ		Preparer's Social Security Number or PTIN			
힏	HERE: of partn		Title		Date	• P00009773			
CERTIFICATION	PREPARER'S Prepare	<sub>rr'e</sub>	Preparer's			¥ <u>F00003773</u>			
띮	ON V. signatul	re:	printed name: ADAM S. LO	NG, CPA	Date	Firm's Employer Identification Number			
占	SANS	IVERI, LONG &	CO., L.L.C.			• 22-3769808			
뜅		CLIFTON AVENU	E SUITE 101		Check if se				
	CLIF	TON, NJ 07013			employed:	·			
			8 Autobaca	A ZID Code					

60910905 994841 09-25-09

YOU MUST ATTACH A COPY OF FEDERAL FORM 1065, INCLUDING THE INDIVIDUAL K-1s, TO THIS RETURN AND COMPLETE THE ADDITIONAL INFORMATION SECTION ON PAGE 2. SEE PAGE 2 FOR MAILING INSTRUCTIONS.

R	EPUBLIC GROUP, LLC	83-0396188			
	DDITIONAL REQUIRED INFORMATION	The following information must be entered for this return to be complete	e.		
1.	Did you file a NYC Partnership Return in 2	007?	YES _		МО
	Did you file a NYC Partnership Return in 2	<b>47</b> .	yes _		NO
3.	Has the Internal Revenue Service or the N	w York State Department of Taxation and Finance increased or			
	decreased any taxable income (loss) report	ted in any tax period, or are you currently being audited?	YES _	X	NO
		Service New York State Department of Taxation and Finance			
	State periods:		and ans	swer	(4).
4.	Has Form(s) NYC-115 (Tax Report of Char	ge in Taxable Income Made by IRS or New York State) been filed?	YES _	<u>X</u>	NO
5.	At any time during the taxable year, did the	partnership have an interest in real property			
	located in NYC or in an entity owning such	real property?	YES _	X	NO
6.	If "YES" to 5:				
	a) Was there a partial or complete liquida	tion of the partnership?	YES _		МО
	b) Was 50% or more of the partnership in	terests transferred in the last 3 years or according to a plan?	YES _		NO
7.	If "YES" to 6a or 6b, was a Real Property	ransfer Tax Return filed?	YES _		NO
8.	If "NO" to 7, explain: (attach additional she	et if necessary)			



#### **MAILING INSTRUCTIONS**

RETURNS CLAIMING REFUNDS

NYC DEPT. OF FINANCE
UNINCORPORATED BUSINESS TAX

P.O. BOX 5050 KINGSTON, NY 12402-5050 ALL OTHER RETURNS

NYC DEPT. OF FINANCE
UNINCORPORATED BUSINESS TAX
P.O. BOX 5060
KINGSTON, NY 12402-5060

The due date for calendar year 2009 is on or before April 15, 2010. For fiscal years beginning in 2009 file by the 15th day of the fourth month following the close of the fiscal year.

To receive proper credit, you must enter your correct Employer Identification Number on your tax return.

NYC-204EZ - 2009

Download forms and instructions online at nyc.gov/finance or call 311. If calling from outside of the five NYC boroughs, please call 212-NEW-YORK (212-639-9675).

		NTC Scrie	dule C - Partnership In		
Partnership	Name REPUI	BLIC GROUP, LLC		Partnership I.D. Number	83-0396188
		Name and Address			
Partner		RAFAEL MARTI	NEZ		
Number	Interest %	300 HOPPER C			
1	95.0000	000% FRANKLIN LAK	ES, NJ 07417		
Canaval	Limited	Partner's Identification	Percentage of Time	Partner's	Partner's
General Partner	Limited	Number	Devoted to Business	Distributive Share	Distributive Pct.
	<u>x</u>	091-58-9756		6,413.	94.993334%
Partner		Name and Address INA SAMUELS	MARTINEZ		
Number	Interest %	300 HOPPER C			
2	5.0000	000% FRANKLIN LAK	ES, NJ 07417		
	) factor d	Deuterale Identification	Percentage of Time	Partner's	Partner's
General Partner	Limited	Partner's Identification Number	Devoted to Business	Distributive Share	Distributive Pct.
raillei	<u>x</u> _	263-81-0455	0010100 10 000111000	338.	5.006666%
	٠.	" Name and Addison		•	
Doctoor		Name and Address			
Partner Number	Interest %				
		%			
			D	Deuterale	Partner's
General	Limited	Partner's Identification Number	Percentage of Time Devoted to Business	Partner's Distributive Share	Distributive Pct.
Partner	-	Number	Devoted to obsidess	DISTRIBUTIVE OFFICE	%
		N 1441			
Dartner		Name and Address			
Partner Number	Interest %				
		%			
					B. tools
General	Limited	Partner's Identification	Percentage of Time Devoted to Business	Partner's Distributive Share	Partner's Distributive Pct.
Partner		Number	Devoted to Business	Distributive Share	% Manual VC 1 CE
		Name and Address			
Partner		name and radiood			
Number	Interest %				
	<del></del>	%			
0	l impited	Dartaar's Identification	Descentage of Time	Partner's	Partner's
General Partner	Limited	Partner's Identification Number	Percentage of Time Devoted to Business	Distributive Share	Distributive Pct.
Partner		UNITE	Peadred to progress	Significants Crists	%
			···········		

NEW YORK CITY
<b>SCHEDULE K-1</b>
EQUIVALENT

### **Partner's New York City Information**

SCHEDULE V-1		For Calendar Year 2009 ( Beginning, 2009; and Ending			2009		
Partner's Name, Address and ZIP Code Partner Number							
RAFAEL MARTINEZ 300 HOPPER COURT FRANKLIN LAKES, NJ 07417			i i	Resident Nonresident X Amended Schedule K-1 Final Schedule K-1			
Partnership's Name, Address and ZIP Code  REPUBLIC GROUP, LLC  260 WEST 36TH STREET, SUITE 901  NEW YORK  NY 10018  Partnership's Identifying Nur 83-0396188  Partner's Percentage of:  Ownership 95.00 % of time devoted Time devoted Time devoted % of Total Distributive Share					<u>0</u> %		
-		ITEMS OF BUSINESS INCOME, GAIN,	LOSS OR DEDUCTION	NC			
1	Ordinary income	(loss)		1	6413.		
2	Net income (loss	) from ALL rental real estate activity not included in line 1		2			
3	All portfolio incor	ne such as interest, dividends, royalties, annuity income ar	nd gain (loss) on th	e disposition			
	of property held	for investment not included in line 1 and line 2		3			
4		ments to partners		4			
5		red partners included in other deductions from federal Forr	n 1065	5			
6_	Other income no	t included in lines 1, 2 and 3		6			
	Charitable contri		7	8			
8		s not included in lines 1, 2 and 3					
9		amounts not included above that are required to be report	ed separately to p	artifers 9	6413.		
10_	Total income (co	mbine lines 1 through 9. DO NOT INCLUDE LINE 7) add) net income from rental or gain from sale or exchange	of real property sit				
- 11		k City if included in line 10 above	or real property of	11			
40		ore New York City modifications (combine line 10 and line	11)	12	6413.		
12		NEW YORK CITY MODIF					
Addi				13			
13		and unincorporated business taxes		142			
14	(a) Sales and us			14b			
	(b) Relocation ci	edits ated to exempt income		140			
	(d) Depreciation		· · · · · · · · · · · · · · · · · · ·	14d			

Subtractions 17 All income taxes and unincorporated business tax refunds 17 18 18 Sales & use tax refunds from vendors or New York State 19 Wages and salaries subject to federal jobs credit 19 20 20 Depreciation adjustments 21 Exempt income included in Part I, line 10 21 22 22 50% of dividends 23 23 Exempt activities 24 Other subtractions

15

(d) Depreciation adjustments

16 Total additions (add lines 13 through 15)

25 Total subtractions (add lines 17 through 24)

(e) Exempt activities

Other additions

14e

15

16

# Partner's New York City Information

NEW YORK CITY SCHEDULE K-1	For Calendar Year 2009 or Fiscal Year			2009		
EQUIVALENT	Beginning, 2009; and Ending	, <u></u> .				
				<u></u>		
Partner's Name, Address	and ZIP Code	Partner Number	2	<del></del>		
		Partner's Identifying Number				
INA SAMUELS		<u> </u>				
300 HOPPER			I	Nonresident X		
FRANKLIN LA	KES, NJ 07417	* Tribbident	l	Final Schedule K-1		
		Amended Schedule K-1		Tillal Ochodulo IV 1		
Partnership's Name, Addr	ress and 7IP Code	Partnership's Identifying Numb	oer			
Partiteiship s Name, Audi	633 diid 211 0000	83-0396188				
REPUBLIC GR	OUP. LLC	Partner's Percentage of:				
260 WEST 36	TH STREET, SUITE 901	Ownership 5.000	000	<u>00</u> %		
NEW YORK	NY 10018	Profit and Loss 5.00	<u> 100000</u> %			
		% of time devoted		_ <del></del>		
		Time devoted				
		% of Total Distributive Shares		5.006666%		
	ITEMS OF BUSINESS INCOME, GAIN, LO	SS OR DEDUCTION				
			1	338.		
1 Ordinary incom	e (loss)		2	330.		
2 Net income (los	s) from ALL rental real estate activity not included in line 1 ome such as interest, dividends, royalties, annuity income and	nain (lose) on the disposition	<u> </u>			
	ome such as interest, dividends, royalties, antitudy income and the for investment not included in line 1 and line 2	gant (1055) on the disposition	3			
	yments to partners		4			
	tired partners included in other deductions from federal Form 1	065	5			
	ot included in lines 1, 2 and 3		6			
7 Charitable cont		7				
	ns not included in lines 1, 2 and 3		8			
	f amounts not included above that are required to be reported	separately to partners	9			
	ombine lines 1 through 9. DO NOT INCLUDE LINE 7)		10	338.		
	, add) net income from rental or gain from sale or exchange of	real property situated				
	ork City if included in line 10 above		11	220		
12 Total income be	efore New York City modifications (combine line 10 and line 11)		12	338.		
Addition	NEW YORK CITY MODIFICA	TIONS				
Additions  13 All income taxe	s and unincorporated business taxes		13			
14 (a) Sales and L			14a			
(b) Relocation			14b			
	(c) Expenses related to exempt income					
(d) Depreciatio	(d) Depreciation adjustments					
(e) Exempt act	ivities		14e			
15 Other additions	······································		15			
16 Total additions	(add lines 13 through 15)		16			
Subtractions			44			
	s and unincorporated business tax refunds		17			
	refunds from vendors or New York State		18			
	aries subject to federal jobs credit		19 20	<u> </u>		
20 Depreciation ac			20 21			
	included in Part I, line 10		22			
22 50% of dividen			23			
23 Exempt activitie			24			
24 Other subtraction	ons ons (add lines 17 through 24)		25			
25 Total subtraction	nto (use miles to un esign ser)					

## 2009 TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM IT-204

### FOR THE YEAR ENDING

DECEMBER 31, 2009

	DUCUMBUR, SA, AVOS.
Prepared for	
	REPUBLIC GROUP, LLC 260 WEST 36TH STREET, SUITE 901 NEW YORK, NY 10018
Prepared by	
	SANSIVERI, LONG & CO., L.L.C. 1135 CLIFTON AVENUE SUITE 101 CLIFTON, NJ 07013
To be signed and dated by	A MEMBER OF THE LLC
Amount of tax	NOT APPLICABLE
Mail tax return to	STATE PROCESSING CENTER P.O. BOX 61000 ALBANY, NY 12261-0001
Forms to be distributed to partners	ENCLOSED ARE COPIES OF SCHEDULE K-1 TO BE DISTRIBUTED TO THE PARTNERS.
Return must be mailed on or before	PLEASE MAIL AS SOON AS POSSIBLE.
Special Instructions	ENCLOSED IS NEW YORK FORM IT-2659. PLEASE SIGN, DATE, AND SEPARATELY MAIL AS SOON AS POSSIBLE TO:
	NYS TAX DEPARTMENT - IT-2659
	P.O. BOX 397
	ALBANY, NY 12201-0397
	MAKE YOUR CHECK OR MONEY ORDER PAYABLE TO COMMISSIONER OF TAXATION AND FINANCE IN THE AMOUNT OF \$26. STAPLE CHECK OR MONEY ORDER TO THE FORM AS INSTRUCTED. DO NOT ATTACH OR FILE THIS FORM WITH ANY OTHER FORM.

IT-204

and ending

## Partnership Return

For calend	ar year 2009 or tax year begin	ning	and endin	-		
Read the instructions, Form IT-204-I, before complet	•	▼	Employer identificati 3-039618		EIN)	
REPUBLIC GROUP, LLC			incipal business activi			_
Trade name of business if different from legal name above		R	EAL ESTA	TE IN	WESTME	N
Address (number and street or rural route)			incipal product or ser ECEIVABL		INANCING	G
260 WEST 36TH STREET, SUITE	90	NA nu	AICS business code imber (see instruction	s) Date b	usiness started	
City, village, or post office State	ZIP code	· · · · · · · · · · · · · · · · · · ·	r	01-	-16-2004	4
NEW YORK NY	10018	5	31390			
21211		Spec	cial conditions for			
Section 1 - Partnership information  A Mark an X in the box that applies to your entity		filing	your 2009 tax return instr.)	•	•	
	pility partnership (LLP)	Portfolio investment p	artnership		Other	
X Limited liability company (LLC - including				y)		
and the second s				Yes 2	X No	
<ul><li>B 1) Did the partnership have any income gain, loss</li><li>2) If No, enter the number of resident partners</li></ul>	, or addiction domos nom.	Joan 1000 42111119 1177 11177	B2			
a sa ta disensa transfers . Observe of odd	ress Initial return	- Amended return	Final re	turn (atta	ch explanation	1)
the state of the s		,		Yes		X
D 1) Is this return the result of federal audit changes  If Yes: 2) Enter date of final federal determine			D2	<b>&gt;</b>		
			· ·	Yes	No	
3) Do you concede the federal audit		No 2) 2			X No	
E Did you file a NYS partnership return for: 1) 2007? If No, state reason:	? E1 Yes X	NO 2) 4		,,,,		2
F Number of partners 1) Article 22			F1			4
2) Article 9-A			F2			
3) Other			F3			2
4) Total			F4			2
G Does the partnership currently have tax accounts v	with NYS for the following taxes	?				
<ol> <li>Sales and use tax</li> </ol> Yes	🖁 No X <i>(if</i>	Yes, enter ID number)	G1			
2) Withholding tax   ● Yes	🖁 No X (if	Yes, enter ID number)	G2			
H Did the partnership have an interest in real property	y located in NYS during the last	three years?	Н	Yes	No	
Has there been a transfer or acquisition of a contro			1	Yes	No	
J Are any partners in this partnership also partnership			J	Yes	No	X
K Did the partnership engage in a like-kind transaction		k vear?	K	Yes	No	X
L Was there a distribution of property or a transfer of			L	Yes	No .	X
and the second s			м	Yes	No	X
and the state of the state of the Alexander and			N	Yes	No	Х
		d to report a				
o Is the partnership required to tile Form DTF-666 or reportable transaction, New York reportable trans			0	Yes	No	X
If Yes, complete and attach Form(s) DTF-686, D			_			
p Did the partnership make purchases subject to sales and d			nstr.) P	Yes	No	X
			's phone number	Perso	onal identification	
Third-party Print designee's name		posigi loo			er (PIN)	
designee? (see instr.)						
Yes X No E-mail:						
▼ Paid preparer must complete (see in	nstructions) 🔻		▼ Sign here	▼		
Preparer's signature	SSN or PTIN:	Signature of general p	artner			
1 Topator o dignaturo	P00009773					
<b>&gt;</b>	Employer identification number	•				
Circula nama (ar yayına if anif amenia anii	22-3769808	Date		▼ Davtir	me phone numb	er
Firm's name (or yours, if self-employed)		vale		, 20,111	Priesse merite	
SANSIVERI, LONG & CO., L.L.	Mark an X if	C manile				
7.00.000	ITE self-employed	E-mail:				
CLIFTON, NJ 07013	Date					
E-mail:				204109	31019	
Mail your return to:			311 <b>26 8 2</b>		Á JENJ I MEN IK MEN	
STATE PROCESSING CENTER, PO BOX 61000, ALB	ANY NY 12261-0001.					
968501 12-08-09 Please file this original scannable return			·    -      <b>      </b>		A COURT BOOK 11 BO	1
-		L L	LIENI	. ['[][	Jγ	
					7	

Page 2 of 6   IT-204 (2009) REPUBLIC GROUP, LLC				^^4/2009) Page (	≥nf8
1   Cross receiptor or sales   1   281,505   281,505   281,505   3   2	Page 2 of 8 IT-204 (2009) REPIDE TO			**************************************	, 0, 5
1   Cross receiptor or sales   1   281,505   281,505   281,505   3   2	Section 2 - Federal ordinary business GROUP, LLC				
2	income from foderal a			10 4-	
2. Returns and allowances 2. Subtract line 2 from line 1 2. 3. Subtract line 2 from line 1 3. 3. 281,505. 3. Subtract line 2 from line 1 4. Cost of goods sold. 5. Gross profit (authract line 4 from line 2) 5. Gross profit (authract line 4 from line 2) 6. Ordinary income (loss) from other partnerships, estates, and trusts (attach statement) 7. Net farm profit (loss) lettech factors from 1040, Schedule 7) 9. Other income (loss) lettech factors from 1040, Schedule 7) 9. Other income (loss) lettech factors from 4797, Part II, line 17 (attach federal Form 4797) 9. Other income (loss) lettech factors statement) 10. Total income (loss) lettech factors from 1040, Schedule 7) 10. 2811, 505.  Part 2 - Deductions from federal Form 1065 11 Salaries and vages (other than to partners) (less employment credits) 12. Guaranteed payments to partners 13. Repairs and maintenance 14. 105, 416. 15. Rent 16. Taxes and ficenses 16. 5, 833. 17. 61, 663. 18. Depreciation (frequired, attach federal Form 4562) 19. Depreciation (frequired, attach federal Form 4562) 19. Depreciation (frequired, attach federal Form 4562) 19. Depreciation (frequired, attach federal Form 1065, Schedule A 19. Depreciation (frequired, attach federal Form 1055, Schedule A 20. Subtracting 21. Depletion (do not deduct of and gas dopletion) 22. Followers benefit programs 23. Followers benefit programs 24. Other deductions (attach statement) 25. Total (actach form withdrawn for personal use 27. Vertaces less cost of florms withdrawn for personal use 28. Cost of goods sold (from withdrawn for personal use 29. Cost of goods sold (attach statement) 29. When the cost of goods sold (attach statement) 20. Cost of good sold (subtract line 23) from line 32) 20. Hone costs (attach statement) 21. Inventory at beginning of year 22. Cost of good sold (subtract line 33) from line 32) 23. Methods used for walling closing inventory (mark at X in sentructions) 24. Other costs (attach statement) 25. Methods used for walling closing line without (mark at X in sentructions) 26. Methods	Gross receipts or sales		c	33-0396188	
Subtract line 2 from line 1 2. 281,505. 4. Cost of goods sold 5. Gross profit (subtract line 4 from fine 3) 4. Cost of goods sold 6. Cordinary income (loss) from other partnerships, estates, and trusts (attach statement) 7. Net fam profit (loss) from other partnerships, estates, and trusts (attach statement) 8. 281,505. 8. Net gain (loss) from federal Form 100, Schedule F) 9. Other income (loss) (attach federal Form 100, Schedule F) 9. Other income (loss) (attach forder statement) 10. Total income (loss) (combine lines 5 through 9) 11. 281,505.  Part 2 - Deductions from federal Form 1065 11 Salaries and wapse (other than to partners) (less employment credits) 12. Guaranteed payments to partners 13. Reprise and wapse (other than to partners) (less employment credits) 14. Bad debts 15. Fent 16. Fent 17. Interest 16. Taxes and ilconses 17. Interest 18. Depreciation (if required, attach federal Form 4582) 19. Depreciation (required, attach federal Form 4582) 19. Depreciation (required, attach federal Form 1085, Schedule A 20. Subtract line 19 from line 13 21. Depletion (do not decluct oil and gas depletion) 22. Retirement plans, etc. 23. Employee benefit programs 24. Other deductions (attach statement) 25. Total deductions (attach statement) 26. Cordinary business income (loss) (subtract line 20 from line 10) 27. Inventory at beginning of year 28. Purchases less cost of items withdrawn for personal use 29. Purchases less cost of items withdrawn for personal use 20. Cost of spods sold (strom federal Form 1065, Schedule A; see instructions) 29. Purchases less cost of items withdrawn for personal use 20. Cost of spods sold (strom statement) 21. Inventory at end of year 22. Cost of spods sold (strom federal Form 1065, Schedule A; see instructions) 23. Medicolosis sold federal statement) 24. Cost of spods sold (strom federal Form 1065, Schedule A; see instructions) 25. Medicolosis sold (subtract fine 33 from line 32) 26. Medicolosis sold (subtract fine 33 from line 32) 27. Medicolosis sold (subtract fine 33 from line 32	and allowances				
Section 3 - Cost of goods sold  4. 281,505.  6 Gross profit (subtract line 4 from line 3)  6 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)  7 Not tamp profit (loss) (attach federal Form 1040, Schedule F)  8 Net gain (loss) from deteral Form 4797, Part II, line 17 (attach federal Form 4797)  9 Other income (loss) (estach statement)  10 Total income (loss) (combine lines 5 through 9)  10. 281,505.  Part 2 - Deductions from federal Form 1065  11 Salaries and wages (other than to partners) (less employment credits)  12 Guaranteed payments to partners  13 Repairs and maintenance  14 Bad debts  15 Rent  16 Taxes and (isonaes  17 Interest  18 Depreciation if required, attach federal Form 4562)  19 Depreciation if required, attach federal Form 4562)  19 Depreciation if required, attach federal Form 1065, Schedule A  20 Subtract line 19 from line 18  21 Depreciation if required, attach federal Form 1065, Schedule A  22 Subtract line 19 from line 18  23 Employee benefit programs  24 Other deductions (attach statement)  25 Total deductions (attach statement)  26 Ordinary business income (loss) (subtract line 25 from line 10)  27 Inventory at beginning of year  28 Ordinary business income (loss) (subtract line 25 from line 10)  29 Oct of taken attachment with frame withdrawn for personal use  20 Cost of taken attachment (loss) (subtract line 25 from line 30)  30 Other cost of goods sold (from federal Form 1065, Schedule A: see instructions)  31 Other cost effects attach statement)  32 Outload lines 27 through 37  33 Other cost effects withdrawn for personal use  24 Octs of depods sold (from federal Form 1065, Schedule A: see instructions)  31 Other cost effects attach statement)  32 Outload sold (authors 40 federal Form 1065, Schedule A: see instructions)  33 Outle cost of goods sold (authors 40 federal Form 1065, Schedule A: see instructions)  34 Meditional III Csecion 283A costs (attach statement)  35 Outload sold (authors 40 federal Form 1065)  36 Methods used for valuing closing	3 Subtract line 2 from line 4	1.	281 505		
3.   281,505.	Cost of goods sold	2.	-04,305.		
Net farm profit (boss) (attach tederal Form 1040, Schedule F)	5 Gross profit (subtraction				
7 Net farn profit (loss) from other partnerships, estates, and trusts (attach statement)  8 Net gain (loss) from federal Form 1040, Schedule F)  9 Other income (loss) (statach federal Form 1040, Schedule F)  10 Total income (loss) (statach statement)  11 Total income (loss) (statach statement)  12 Salaries and wages (other than to partners) (lass employment credits)  13 Repairs and maintenance  14 10 Salaries and wages (other than to partners) (lass employment credits)  15 Repairs and maintenance  16 Taxes and iscenses  17 Interest  18 Berner (lass) (last chart federal Form 4562)  19 Depreciation (larguined, attach federal Form 4562)  10 Depreciation (larguined, attach federal Form 4562)  10 Depreciation (larguined, attach federal Form 4562)  11 Depreciation (larguined, attach federal Form 4562)  12 Depreciation (larguined, attach federal Form 4562)  13 Depreciation (larguined, attach federal Form 4562)  14 Depreciation (larguined, attach federal Form 4562)  15 Depreciation (larguined, attach federal Form 4562)  16 Depreciation (larguined, attach federal Form 4562)  17 Depreciation (larguined, attach federal Form 4562)  18 Depreciation (larguined, attach federal Form 4562)  19 Depreciation (larguined, attach federal Form 4562)  10 Depreciation (larguined, attach federal Form 4562)  21 Depletion (larguined, attach federal Form 4562)  22 Subtract fine 19 from line 18  23 Depreciation (larguined, attach federal Form 4562)  24 Other deductions (larguined, attach federal Form 4562)  25 Total deductions (larguined, attach federal Form 1065, Schedule A; see instructions)  26 Section 3 - Cost of goods sold (from federal Form 1065, Schedule A; see instructions)  27 Inventory at beginning of year  28 Octor of labor  29 Octor of labor  20 Additional IRC section 263A costs (attach statement)  20 Cost of labor  20 Cost of goods sold (larguined, attach statement)  21 Cost of goods sold (larguined, attach statement)  22 Cost of goods sold (larguined, attach statement)  29 Cost of goods sold (larguined, attach federal Form 106	6 Ordinary income (fee a from line 3)		3.	281 50	
9 Other income (loss) (attach statement) 10 Total income (loss) (combine lines 5 through 9) 10 Total income (loss) (combine lines 5 through 9) 10 Total income (loss) (combine lines 5 through 9) 11 Salaries and wages (other than to partners) (less employment credits) 12 Quaranteed payments to partners 13 Repairs and maintenance 14 Bad debts 15 Repairs and maintenance 16 Taxes and licenses 17 Interest 18 Taxes and licenses 19 Depreciation (if required, attach federal Form 4562) 19 Depreciation reported on federal Form 4562) 19 Depreciation reported on federal Form 1065, Schedule A 19 and elsewhere on return 20 Subtract line 19 from line 18 21 Depletion (co not deduct oil and gas depletion) 22 Retirement plans, etc 23 Employee benefit programs 24 Other deductions (attach statement) 25 Total deductions (attach statement) 26 Ordinary business income (loss) (subtract line 25 from line 10) 27 Section 3 - Cost of goods sold (from federal Form 1065, Schedule A; see instructions) 28 Purchases less cost of Rems withdrawn for personal use 29 Cost of labor 30 Additional IRC section 263A costs (attach statement) 31 Other costs (attach statement) 32 Total (add lines 27 through 31) 33 Threntory at end of year 34 Other costs (attach statement) 35 Cost of goods sold (subtract line 23 from line 32) 36 Additional IRC section 263A costs (attach statement) 37 Inventory at end of year 38 Inventory at end of year 39 Inventory at end of year 40 Cost of goods sold (subtract line 23 from line 32) 41 Methods used for valuing closing inventory (mark an X in application and inventory (mark an X in application and inventory (mark an X in application and inventory (mark an X in application and inventory (mark an X in application and inventory (mark an X in application and inventory (mark an X in application and inventory (mark an X in application and inventory (mark an X in application and inventory (mark an X in application and inventory (mark an X in application and inventory (mark an X in application and inventory (mark an X in application	7 Net farm profit (Ioss) from other partnerships actata		4.	201,50	•
### 10 Total income (loss) (attach statement)  10 Total income (loss) (combine lines 5 through 9)  11 Total income (loss) (combine lines 5 through 9)  12 Part 2 - Deductions from federal Form 1065  13 Salaries and wages (other than to partners) (less employment credite)  14 Salaries and wages (other than to partners) (less employment credite)  15 Salaries and wages (other than to partners) (less employment credite)  16 Taxes and wages (other than to partners) (less employment credite)  17 Salaries and wages (other than to partners) (less employment credite)  18 Salaries and wages (other than to partners) (less employment credite)  19 Salaries and wages (other than to partners) (less employment credite)  10 Total accurate payments to partners  11 Salaries and wages (other than to partners) (less employment credite)  12 Salaries and wages (other than to partners) (less employment credite)  13 Salaries and wages (other than to partners) (less employment credite)  14 Salaries and wages (other than to partners) (less employment credite)  15 Salaries and wages (other than to partners) (less employment credite)  16 Taxes and licenses  17 Salaries and wages (other than to partners) (less employment credite)  18 Salaries and wages (other than to partners) (less employment credite)  19 Salaries and wages (other than to partners) (less employment credite)  10 Taxes and licenses  11 Salaries and wages (other than to partners) (less employment credite)  11 Invention (less of the salaries) (less employment credite)  12 Salaries and wages (lether from 1065, Schedule A; see instructions)  12 Salaries and wages (lether and than to partners) (less employment credite)  13 Salaries and wages (lether and than to partners) (less employment credite)  14 Salaries and wages (lether and sold in and salaries)  15 Salaries and wages (lether and sold in and salaries)  16 Taxes and licenses (lether and salaries)  17 Salaries and wages (lether and salaries)  18 Salaries and wages (lether and salaries)  19 Salaries and wages (lether and salar	8 Net gain (loss) (attach federal Form 1040, School is	(attach statement)	5.	201	
Part 2 - Deductions from federal Form 1065  11	9 Other income (f)	- Inchity	6.	401,505	•
Part 2 - Deductions from federal Form 1065  11	10 Total income (loss) (attach statement)	al Form 4797)	7.		
Part 2 - Deductions from federal Form 1065  11	(loss) (combine lines 5 through or	,	8.		
Part 2 - Deductions from federal Form 1065     11   Salaries and wages (other than to partners) (less employment credits)     12   Guaranteed payments to partners   11.   105 , 416 .     13   Hard Bad debts   12.   105 , 416 .     14   Bad debts   12.   105 , 416 .     15   Rent   13.   13 , 586 .     16   Taxes and licenses   14.   16.   15.     17   Interest   15.   16.   17.   10 , 663 .     18   Depreciation (if required, attach federal Form 4562)   18.   17.   10 , 663 .     19   Depreciation (if required, attach federal Form 1065, Schedule A and elsewhere on return   19.     20   Subtract line 19 from line 18   19.     21   Depletion (do not deduct oil and gas depletion)   20.     22   Retirement plans, etc   21.     23   Employee benefit programs   22.     24   Other deductions (attach statement)   25.   274 , 754 .     25   Total deductions (attach statement)   25.   274 , 754 .     26   Ordinary business income (loss) (subtract line 25 from line 10)   25.   274 , 754 .     27   Inventory at beginning of year   27.   28.     28   Cost of goods sold (from federal Form 1065, Schedule A; see instructions)   29.     29   Cost of labor   29.   27.   28.     30   Additional IRC section 283A costs (attach statement)   29.   20.   2			9.		
12   Guaranteed payments to partners (less employment credits)   11.   105,416.     13   Repairs and maintenance   12.   105,416.     14   Bad debts   13.   13,586.     15   Rent   14.   13,586.     16   Taxes and licenses   14.   15.     17   Interest   16.   5,833.     18   Depreciation (if required, attach federal Form 4562)   18.   10.     19   Depreciation reported on federal Form 1065, Schedule A   18.   17.     10   Action reported on federal Form 1065, Schedule A   19.     20   Subtract line 19 from line 18   19.     21   Depletion (do not deduct oil and gas depletion)   20.     22   Employee benefit programs   22.     23   Employee benefit programs   22.     24   Ordinary business income (loss) (subtract line 25 from line 10)   5EE STATEMENT   24.   78, 201.     25   Ordinary business income (loss) (subtract line 25 from line 10)   26.   6, 7551.     26   Ordinary business cost of items withdrawn for personal use   27.     27   Inventory at beginning of year   28.     28   Cost of labor   293A costs (attach statement)   29.     29   Cost of labor   293A costs (attach statement)   29.     20   Cost of labor   293A costs (attach statement)   29.     20   Cost of goods sold (subtract line 33 from line 32)   30.     3   Inventory at end of year   31.     4   Cost of goods sold (subtract line 33 from line 32)   32.     4   Cost of goods sold (subtract line 33 from line 32)   32.     5   Methods used for valuing closing inventory (mark an X in application of the costs described inventory (mark an X in application of the cost and cost of subtract line 23 from line 32)   32.     5   Methods used for valuing closing inventory (mark an X in application of the cost and cost of subtract line 23 from line 32)   33.     6   Methods used for valuing closing inventory (mark an X in application of the cost and cost of the cost and cost of the cost and cost of the cost and cost of the cost and cost of the cost and cost of the cost and cost of the cost and cost of the cost of the cost of the cost of the cost of the cos	Part 2 - Dading		•	0.5	
11   105   1416   15   16   17   17   18   18   19   19   19   19   19   19	11 Salarica and federal Form 1065			281,505	,
14. Bad debts 15. Rent 16. Taxes and licenses 17. Interest 18. Depreciation (if required, attach federal Form 4562) 19. Depreciation reported on federal Form 1065, Schedule A 19. Depreciation (if required, attach federal Form 1065, Schedule A 20. Subtract line 19 from line 18 21. Depletion (do not deduct oil and gas depletion) 22. Retirement plans, etc 23. Employee benefit programs 24. Other deductions (add lines 11 through 17 and lines 20 through 24) 25. Total deductions (add lines 11 through 17 and lines 20 through 24) 26. Ordinary business income (loss) (subtract line 25 from line 10) 27. Inventory at beginning of year 28. Purchases less cost of items withdrawn for personal use 29. Cost of labor 20. Cost of labor 21. Total (add lines 26 through 24) 22. Inventory at Deplinning of year 23. Inventory at Deplinning of year 24. Other costs (attach statement) 25. Cost of labor 26. Cost of labor 27. Inventory at Deplinning of year 28. Inventory at Deplinning of year 29. Cost of labor 29. Cost of labor 30. Additional IRC section 263A costs (attach statement) 31. Other costs (attach statement) 32. Inventory at end of year 33. Inventory at end of year 34. Cost of goods sold (subtract line 33 from line 32) 35. Methods used for valking closing inventory (mark an X in application) 36. Cost at description of valking closing inventory (mark an X in application) 37. Cost at description of valking closing inventory (mark an X in application) 38. Cost at description of valking closing inventory (mark an X in application) 39. Cost at description of valking closing inventory (mark an X in application) 30. Cost at description of valking closing inventory (mark an X in application) 31. Cost at description of valking closing inventory (mark an X in application) 31. Cost at description of valking closing inventory (mark an X in application) 31. Cost at description of valking closing inventory (mark an X in application) 32. Cost at description of valking closing inventory (mark an X in application) 33. Cost at all the 25 through 31	12 Guarant and wages (other than to partners) a				
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13. 13,586.  14. 14. 13,586.  15. 15. 5,833.  16. 16. Taxes and licenses  17. Interest 18. 15. 5,833.  19. Depreciation reported on federal Form 1065, Schedule A  20. Subtract line 19 from line 18  21. Depletion (do not deduct oil and gas depletion)  22. Retirement plans, etc  23. Employee benefit programs  24. Other deductions (attach statement)  25. Total deductions (attach statement)  26. Ordinary business income (loss) (subtract line 25 from line 10)  27. Inventory at beginning of year  28. Purchases less cost of items withdrawn for personal use  29. Cost of labor  20. 21. 22. 23. 24. 25. 26. 6, 751.  27. Inventory at Section 3 - Cost of goods sold (from federal Form 1065, Schedule A; see instructions)  29. Cost of labor  20. 21. 22. 23. 26. 274, 754. 26. 274, 754. 27. 27. 27. 27. 27. 27. 27. 27. 27. 27	oad debts		· =	105,416.	
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15. 5,833.  16. 10,663.  19. Depreciation reported on federal Form 1065, Schedule A and elsewhere on return  20. Subtract line 19 from line 18 21. Depletion (do not deduct oil and gas depletion)  22. Retirement plans, etc 23. Employee benefit programs 24. Other deductions (attach statement) 25. Total deductions (attach statement) 26. Ordinary business income (loss) (subtract line 25 from line 10)  27. Inventory at beginning of year  28. Purchases less cost of items withdrawn for personal use  29. Cost of labor  20. Additional IFIC section 263A costs (attach statement)  21. Other costs (attach statement)  22. Total (add lines 27 through 31) 23. Other costs (attach statement) 24. Other costs (attach statement) 25. Depreciation (line 263A costs (attach statement) 26. Other costs (attach statement) 27. Other costs (attach statement) 28. Ocst of labor 29. Ocst of labor 20. Other costs (attach statement) 29. Other costs (attach statement) 30. Other costs (attach statement) 31. Other costs (attach statement) 32. Other costs (attach statement) 33. Other costs (attach statement) 34. Other costs (attach statement) 35. Other costs (attach statement) 36. Other costs (attach statement) 37. Other costs (attach statement) 38. Other costs (attach statement) 39. Other costs (attach statement) 30. Other costs (attach statement) 31. Other costs (attach statement) 32. Other costs (attach statement) 33. Other costs (attach statement) 34. Other costs (attach statement) 35. Other costs (attach statement) 36. Other costs (attach statement) 37. Other costs (attach statement) 38. Other costs (attach statement) 39. Other costs (attach statement) 30. Other costs (attach statement) 30. Other cost	13 laxes and licenses			13,586	
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and elsewhere on return  20 Subtract line 19 from line 18  19.  21 Depletion (do not deduct oil and gas depletion)  22 Retirement plans, etc  23 Employee benefit programs  24 Other deductions (add lines 11 through 17 and lines 20 through 24)  25 Total deductions (add lines 11 through 17 and lines 20 through 24)  26 Ordinary business income (loss) (subtract line 25 from line 10)  27 Inventory at beginning of year  29 Purchases less cost of items withdrawn for personal use  20.  21.  22.  23.  24.  78, 201.  25.  274, 754.  6, 751.  27 Inventory at beginning of year  29 Purchases less cost of items withdrawn for personal use  20.  21.  22.  23.  24.  25.  274, 754.  6, 751.  27 Inventory at beginning of year  29 Cost of labor  20 Cost of labor  21 Other costs (attach statement)  22 Other costs (attach statement)  23 Additional IRC section 263A costs (attach statement)  25 Other costs (attach statement)  26 Other costs (attach statement)  27 Other costs (attach statement)  28 Other costs (attach statement)  29 Other costs (attach statement)  20 Other costs (attach statement)  21 Other costs (attach statement)  22 Other costs (attach statement)  23 Other costs (attach statement)  24 Other costs (attach statement)  25 Otal (add lines 27 through 31)  26 Inventory at end of year  27 Other costs (attach statement)  28 Other costs (attach statement)  29 Other costs (attach statement)  30 Other costs (attach statement)  31 Other costs (attach statement)  32 Other costs (attach statement)  33 Other costs (attach statement)  34 Other costs (attach statement)  35 Other costs (attach statement)  36 Other costs (attach statement)  37 Other costs (attach statement)  38 Other costs (attach statement)  39 Other costs (attach statement)  30 Other costs (attach statement)  31 Other costs (attach statement)  32 Other costs (attach statement)  33 Other costs (attach statement)  34 Other costs (attach statement)  36 Other costs (attach statement)  37 Other costs (attach statement)  38 Other costs (attach statement)  39 Other costs (a	Depreciation (if required, attach fod-			5,833	
and elsewhere on return  20 Subtract line 19 from line 18  19.  20.  21 Depletion (do not deduct oil and gas depletion)  22 Employee benefit programs  23 Other deductions (attach statement)  25 Total deductions (add lines 11 through 17 and lines 20 through 24)  26 Ordinary business income (loss) (subtract line 25 from line 10)  27 Inventory at beginning of year  29 Purchases less cost of items withdrawn for personal use  20	Depreciation reported on federal Form 4562)			10.663	
Subtract line 19 from line 18  19.  20.  21.  22.  23.  24. Other deductions (attach statement)  25. Total deductions (attach statement)  26. Ordinary business income (loss) (subtract line 25 from line 10)  SEE STATEMENT 1 24.  27.  28.  29.  29.  20.  21.  22.  23.  24.  25.  26.  274, 754.  274, 754.  274, 754.  275.  28.  29.  29.  29.  29.  29.  29.  29	and elsewhere on material Form 1065, Schedule A	<b></b>	17,	61.055	
Pepideun (do not deduct oil and gas depletion)  Retirement plans, etc  Employee benefit programs  21.  22.  23.  24. Other deductions (attach statement)  25. Total deductions (add lines 11 through 17 and lines 20 through 24)  26. Ordinary business income (loss) (subtract line 25 from line 10)  Section 3 - Cost of goods sold (from federal Form 1065, Schedule A; see instructions)  27. Inventory at beginning of year  28. Purchases less cost of items withdrawn for personal use  29. Cost of labor  Cost of labor  Additional IRC section 263A costs (attach statement)  Total (add lines 27 through 31)  Inventory at head of year  29. Total (add lines 27 through 31)  Inventory at head of year  29. Total (add lines 27 through 31)  Inventory at head of year  30. Inventory at head of year  31. Ocst of goods sold (subtract line 33 from line 32)  Methods used for valuing closing inventory (mark an X in application)  Methods used for valuing closing inventory (mark an X in application)  20. Additional IRC section 263A costs (mark an X in application)  30. Section 3 - Cost of goods sold (subtract line 33 from line 32)  31. Methods used for valuing closing inventory (mark an X in application)  22. Total additional lines are through 33.	Subtract line 10 from the			-,000,	
Employee benefit programs  Other deductions (attach statement)  Total deductions (add lines 11 through 17 and lines 20 through 24)  SEE STATEMENT 1 24. 78, 201.  Cost of goods sold (from federal Form 1065, Schedule A; see instructions)  Purchases less cost of items withdrawn for personal use  Cost of labor  Additional IRC section 263A costs (attach statement)  Other costs (attach statement)  Total (add lines 27 through 31)  Inventory at end of year  Cost of goods sold (subtract line 33 from line 32)  Methods used for valuing closing inventory (mark an X in applicat to the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of goods sold (subtract line 33 from line 32)  Methods used for valuing closing inventory (mark an X in applicat to the state of the st	- Depletion (do not dodge : "	) <b>.</b>			
Employee benefit programs  Other deductions (attach statement)  Total deductions (add lines 11 through 17 and lines 20 through 24)  SEE STATEMENT 1 24. 78, 201.  Cost of goods sold (from federal Form 1065, Schedule A; see instructions)  Purchases less cost of items withdrawn for personal use  Cost of labor  Additional IRC section 263A costs (attach statement)  Other costs (attach statement)  Total (add lines 27 through 31)  Inventory at end of year  Cost of goods sold (subtract line 33 from line 32)  Methods used for valuing closing inventory (mark an X in applicat to the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of goods sold (subtract line 33 from line 32)  Methods used for valuing closing inventory (mark an X in applicat to the state of the st	22 Retirement plans etc. (22 Retirement plans etc.)				
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Section 3 - Cost of goods sold (from federal Form 1065, Schedule A; see instructions)  27 Inventory at beginning of year  28 Purchases less cost of items withdrawn for personal use  29 Cost of labor  Additional IRC section 263A costs (attach statement)  20 Other costs (attach statement)  21 Total (add lines 27 through 31)  32 Inventory at end of year  4 Cost of goods sold (subtract line 33 from line 32)  Methods used for valuing closing inventory (mark an X in application)  Cost as described in a subtract in application.	26 Ordinary business in a 11 through 17 and lines 20 44	SEE STATEMENT	23.		
Section 3 - Cost of goods sold (from federal Form 1065, Schedule A; see instructions)  27 Inventory at beginning of year  28 Purchases less cost of items withdrawn for personal use  27 Cost of labor  28 Additional IRC section 263A costs (attach statement)  29 Total (add lines 27 through 31)  20 Inventory at end of year  21 Cost of goods sold (subtract line 33 from line 32)  32 Methods used for valuing closing inventory (mark an X in applicate)  26 Cost of section 263.  27 Additional IRC section 263A costs (attach statement)  29 Double Inventories  20 Additional IRC section 263A costs (attach statement)  20 Double Inventories  21 Double Inventories  22 Double Inventories  23 Double Inventories  24 Double Inventories  25 Double Inventories  26 Double Inventories  27 Double Inventories  28 Double Inventories  29 Double Inventories  20 Double Inventories  20 Double Inventories  20 Double Inventories  21 Double Inventories  22 Double Inventories  23 Double Inventories  26 Double Inventories  27 Double Inventories  28 Double Inventories  29 Double Inventories  20 Double Inventories  20 Double Inventories  20 Double Inventories  20 Double Inventories  21 Double Inventories  22 Double Inventories  23 Double Inventories  24 Double Inventories  25 Double Inventories  26 Double Inventories  27 Double Inventories  28 Double Inventories  29 Double Inventories  20 Double Inventories  20 Double Inventories  20 Double Inventories  20 Double Inventories  21 Double Inventories  22 Double Inventories  25 Double Inventories  26 Double Inventories  27 Double Inventories  28 Double Inventories  29 Double Inventories  20 Double Inventories  20 Double Inventories  20 Double Inventories  20 Double Inventories  20 Double Inventories  22 Double Inventories  23 Double Inventories  26 Double Inventories  27 Double Inventories  28 Double Inventories  29 Double Inventories  20 Double Inventories  20 Double Inventories  20 Double Inventories  20 Double Inventories  21 Double Inventories  22 Double Inventories  23 Double Inventories  24 Double	(loss) (subtract line 25 fmm !	EMENL	L 24.	70 0	
Inventory at beginning of year Purchases less cost of items withdrawn for personal use Cost of labor Additional IRC section 263A costs (attach statement) Cother costs (attach statement) Cost of goods sold (subtract line 33 from line 32) Methods used for valuing closing inventory (mark an X in applicat to the statement)  6 , 751.  6 , 751.  6 , 751.  6 , 751.  6 , 751.  6 , 751.  6 , 751.	Lo Irom line 10)		25.	78,201.	
Additional IRC section 263A costs (attach statement)  Total (add lines 27 through 31)  Inventory at end of year  Cost of goods sold (subtract line 33 from line 32)  Methods used for valuing closing inventory (mark an X in applicate)  Cost as described in (1)	Section 3 - Cost of		26.	4/4,754.	
Additional IRC section 263A costs (attach statement)  Total (add lines 27 through 31)  Inventory at end of year  Cost of goods sold (subtract line 33 from line 32)  Methods used for valuing closing inventory (mark an X in applicate)  Cost as described in (1)	27 Inventory at books 1			0,751.	
Additional IRC section 263A costs (attach statement)  Total (add lines 27 through 31)  Inventory at end of year  Cost of goods sold (subtract line 33 from line 32)  Methods used for valuing closing inventory (mark an X in applicate)  Cost as described in the section 263A costs (attach statement)  28.  29.  30.  31.  32.  33.	28 Purchases less and Purchases	e instructional			
Other costs (attach statement)  Total (add lines 27 through 31)  Inventory at end of year  Cost of goods sold (subtract line 33 from line 32)  Methods used for valuing closing inventory (mark an X in applicate)  Cost as described in the section 263A costs (attach statement)  28.  30.  31.  32.  32.  33.	29 Cost of labor withdrawn for personal	wouldrisj			
Total (add lines 27 through 31)  Inventory at end of year  Cost of goods sold (subtract line 33 from line 32)  Methods used for valuing closing inventory (mark an X in applicate)  Cost as described in a substance of the substan	0 Additional too		27.		_
10tal (add lines 27 through 31) 30. 31. 4 Cost of goods sold (subtract line 33 from line 32) 5 Methods used for valuing closing inventory (mark an X in applicate)  Cost as described in (1)  Cost as described in (1)	1 Other costs (4)				
Inventory at end of year  Cost of goods sold (subtract line 33 from line 32)  Methods used for valuing closing inventory (mark an X in applicate)  Cost as described in the second of th	2 Total (add (12-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-		•		
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Methods used for valuing closing inventory (mark an X in application)  Cost as described in a second control of the second control o	and of the second				
Cost as described in the cost of the cost	USI Of monde and decided in				
Cost as described in federal regulations section 1.471.3  Other (specify method user)  Cost as described in federal regulations section 1.471.3	welliods used for valuing closing invent				
Lower of cost or market as described in federal regulations section 1.471-3  Other (specify method user)	Cost as described in federal road (mark an X in applicable house)				
Other (specify method user as described in federal regulations particularly method user)	Lower of cost or market as described 1.471-3		<b>94.</b>		
A TOWNSHIP OF A DEPARTMENT CONSISTS A	Other (specify method used in federal regulations seed)				30
Was them.	and explain)	71-4			
Was there a water d	Was there a west at				
	Was LIFO inventory method and a goods as described in federal				00
Do the rules of IRC section occasion this tax year for any goods acceptance of IRC section occasion.	Do the rules of IRC section coats.	section 1.471-2 (a)2			
Do the rules of IRC section 263A (for property produced or acquired for resale) apply to the partnership?  If Yes, explain  Yes  No  No  Yes  No  Yes  No  Yes  No  No  Yes  No  No  Yes  No  No  Yes  No  No  No  Yes  No  No  No  No  No  No  No  No  No  N	Vas there any change in detail of the property produced or account of the produced or account of the p	federal Form 070 1	Yes	Ma	
If Yes, explain  No  No  No  No  No  No  No  No  No  N	If Yes, explain	ipply to the now	Yes		
No Yes No	oost, or valuations between ope	Pning and alast	Yee		
No No	-	and closing inventor	y? Von		
res No			1 es	No	



	A	89.	
90	Other net rental income (loss) (subtract line 88b from line 88a)	90.	
	Guaranteed payments Interest income	91.	
	Ordinary dividends	92.	
	Royalties	93.	
	Net short-term capital gain (loss) (attach federal Schedule D)	94.	
	Net long-term capital gain (loss) (attach federal Schedule D)	95.	
	Net section 1231 gain (loss) (attach federal Form 4797)	96.	
	Other income (loss) (see instructions) Identify:	97.	
98	Section 179 deduction (attach federal Form 4562)	. <b>98.</b>	
99	Other deductions (see instructions) Identify:	99.	
100	Tax preference items for minimum tax (see instructions)  Identify:	100.	
		101.	
	Net earnings (loss) from self-employment	102.	6,349.
	Tax-exempt income and nondeductible expenses (see instructions)  Distributions - cash and marketable securities	103.	
	Distributions - other property	104.	
	Other items not included above that are required to be reported separate identify:	ely to partners (see inst.) 105.	
	rsis of net income (loss)		6,751.
106	Enter amount from federal Form 1065, Analysis of Net Income (Loss), line	e 1 106.	0,731.
Analy	rsis by type of partner	General Partners	Limited Partners



## Section 8 - New York modifications (see instructions)

107	New York State add	litions			
	Number	A - Total amount	B - New York State allocated amount	•	
107a.	EA-				
107b.	EA-				
107c.	EA-				
107d.	EA-				
107e.	EA-				
107f.	EA-				
108	Total addition modi	fications (total of column A	, lines 107a though 107f)	108.	
	<u></u>				<u>,</u>
109	New York State sub	otractions			
	Number	A - Total amount	B - New York State allocated amount		
109a.	ES-				
109b.	ES-				
109c.	ES-				
109d.	ES-				
109e.	ES-				
109f.	ES-				
110	Total subtraction m	odifications (total of colum	n A, lines 109a though 109f)	110.	
		19 1 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
111		l itemized deductions			
	Letter	Amount			
111a.					
111b.					
111c.					
111d.					
111e.					
111f.					
112	Total additions to fe	ederal itemized deductions	(add lines 111a through 111f)	112.	
113	Subtractions from f	ederal itemized deductions	3		
	Letter	Amount			
113a.					
113b.					
113c.					
113d.					
113e.					
113f.					
114	Total subtractions f	rom federal itemized deduc	ctions (add lines 113a through 113f)	114.	
1 14	Total Subtractions I	TOTAL TOTAL TOTAL	and the state of t		
115	New York adjustme	nts to tax preference items	3	115.	
	-	-			



# REPUBLIC GROUP, LLC Section 9 - Other information

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. .

281,505.

116a New York source gross income (see instructions)

116a.

116b.

116b Net earnings from self-employment allocated to the MCTD (see *instructions*)
117 Is this partnership a partner in another partnership or LLC? (If Yes, list the names and ElNs below;

attach additional sheets if necessary.)

.

Yes

No X

Name of entity

EIN

#### Section 10 - New York allocation schedule

Part 1 - List all places, both in and out of NYS, where the partnership carries on business (attach additional sheets if necessary)

Street address

City and state

Description (see instructions)

118 Do books and records reflect income earned in New York? (If Yes, do not complete Part 2.)

Yes X No

Part 2 - Formula basis allocation of income if books and records do not reflect income earned in New York

Ite	ms used as factors	A - Totals - in and out of NYS	B - New York State amounts	C - Percent col	. B
Pro	operty percentage (see instructions)	Dollars	Dollars	is of col. A	,
119	Real property owned	119.	119.		
120	Real property rented from others	120.	120.		
121	Tangible personal property owned	121.	121.		
122	Property percentage				
	(add lines 119, 120, and 121; see instr.)	122.	122.	122.	%
123	Payroll percentage (see instr.)	123.	123.	123.	%
124	Gross income percentage				
	(see instr.)	124.	124.	124.	%
125	Total of percentages (total column	C, lines 122, 123, and 124)		125.	%
126	Business allocation percentage (	divide line 125 by three or by actual nui	mber of percentages if less than three)	126.	%

#### Section 11 - Partners' credit information (see instructions)

#### Part 1 - Pass-through credit bases and factors

Brownfield redevelopment tax credit (Form IT-611 or IT-611.1)

127	Site preparation credit component	127.
128	Tangible property credit component	128.
129	On-site groundwater remediation credit component	129.



	on 11 (continu		BLIC (	GROUP,	LLC				83-0396188
EZ cap	oital tax credit (i Investments in	contition 57 but	inoccoc					130.	
				, dovalonmer	at projecte			131.	
131	Contributions							132.	
132	Recapture of c					alanmant n	rojecte	133.	
133	Recapture of c	redit for contrib	utions of n	noney to EZ (	community devi	еюршен р	rojecis	150.	
OE7E	tax reduction c	redit (Form IT-f	(04)						
	QEZE employn							134.	
	QEZE zone allo		V.V.					135,	
135	QEZE ZONE AND	Cation factor							
136	QEZE benefit p	eriod factor						136.	
OFTC	facilities, opera	itions, and trai	nina credit	t (Form DTF-	619)				
137	Research and							137.	
138	Qualified resea							138.	
139	Qualified high-t				component			139.	
	_				•				
	rs' school tax c							440	
	Acres of qualifi							140.	
141	Acres of qualifi							141.	
142								142.	
143	Acres of qualifi	ed agricultural	property co	onverted to n	onqualified use	•		143.	
Other	pass-through c	redit hases an	d factors						
	edit bases	, car, bases an	u 10010.0						
Oit	Code	Amour	ıt		Code		Amount		
144a.	Oode	Amour		1440					
144b.				1446					
144c.				144					
	edit factors			•••	••				
·	Code	Factor		Code	Factor		Code	Factor	
144g.	Oode	1 40101	144i.			144k.		•	
144h.			144j.			1441.			
[4-11];	<u> </u>						<del> </del>		
Dart 2	- Pass-through	credits. addha	icks and n	ecaptures		•			
	Long-term care							145.	
146a	Investment cre				and historic barn	rehabilitation	credit: Form (	[-212] <b>146a.</b>	
146b	Research and							146b.	
-	Other pass-thro		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	oroale (r oran	· - · - ·				
147	Code	Amour			Code		Amount		
447-	Code	Amou	16	1476		,	Allount	,	
147a.				147					
147b.				1479			•		
147c.				1479	1				
147d.				1471	••				
148	Addbacks of cr	redits and recap	otures						
	Code	Amour			Code		Amount		
148a.				1480	i.				
148b.				1486	).				
				440					



148c.

1481.

NY IT-204 OTHER DEDUCTIONS		STATEMENT	1
DESCRIPTION		AMOUNT	
DANK GERVICE CUARCEC	•	1,52	20.
BANK SERVICE CHARGES INSURANCE		5,84	12.
MEALS AND ENTERTAINMENT		6,35	
OFFICE EXPENSE		16,26	
PROFESSIONAL FEES		36,36 8,50	
SUNDRY		2,2	
TRAVEL UTILITIES		1,0	
TOTAL TO FORM IT-204, PAGE 2, LINE 24		78,2	01.
NY IT-204 OTHER ASSETS		STATEMENT	2
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TA	X
DUE FROM PARTNERS	419,870.	480,2	70.
TOTAL TO FORM IT-204, PAGE 3, LINE 56	419,870.	480,2	70.
NY IT-204 OTHER LIABILITIES	3	STATEMENT	3
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TA YEAR	x
LOANS - OTHERS	496,430.	556,8	30.
TOTAL TO FORM IT-204, PAGE 3, LINE 63	496,430.	556,8	30.
NY IT-204 EXPENSES RECORDED ON BOOKS NOT DE	EDUCTED IN RETUR	RNSTATEMENT	4
DESCRIPTION		AMOUNT	
TRAVEL/ENTERTAINMENT		6,3	49.
TOTAL TO FORM IT-204, PAGE 4, LINE 69		6,3	19

## New York Partner's Schedule K-1

2009

IT-204-IP

Tax Law - Article 22 (Personal Income Tax)

and ending

Final K-1 Amended K-1

For calendar year 2009 or tax year beginning Partners: Before completing your income tax return, see Form IT-204-IP-I, Partner's Instructions for Form IT-204-IP(available at www.nystax.gov).

Partnership's information (see instructions)

Partnership's name (as shown on Form IT-204)

REPUBLIC GROUP, LLC

Partnership's EIN 83-0396188

Mark an X in the box if either applies to your entity

Publicly traded partnership

Portfolio investment partnership

Tax shelter registration number, if any

Business allocation percentage

В С

100.0000

Partner's identifying number

091-58-9756

%

Partner's information (see instructions)

Partnèr's name

RAFAEL MARTINEZ

Partner's address

300 HOPPER COURT

State

ZIP code

FRANKLIN LAKES

NJ

07417

D	The	oartner	is a (mark an X i	n the appropria	ite box)	General partner	or LLC member	-mana	ger	X		oartner o	other		
E						in the appropriate box, if	known.)	X	individu	al	Esta	te/trust		Partne	ersnip
F					or grantor trust,		•								
-						the income, if kno	wn				F				v
G					during the tax y						G	Yes		No	X
										D			End	lina	
Н	Parti	ner's sh	are of profit, I	oss, and ca	pital					Begin		0/		0000	%
	1)	Profit							H1		0000	%	_	0000	
	2)	Loss							H2		0000	%			
	3)	Capita	ai					ا	НЗ	95.	0000	%	95.	0000	%
1	Part	ner's sh	are of liabilitie	s at the en	d of the year										
	1)	Nonre	course								11				
	2)	Qualifi	ied nonrecou	rse financin	g						12				
	3)	Recou	ırse								13				
J	Parti	ner's ca	pital account	analysis										71 0	60
_	1)	Begin	ning capital a	ccount	•						J1			71,8	04.
	2)		al contributed		year - cash						J2				
	3)	-			year - property						J3		•	_	
	4)	•	nt year increa								J4			3	81.
	5)		rawals and di								J5				
	6)		rawals and di								J6				
	7)		g capital acco								J7		-	-71,4	81.
	8)				n X in the appro	priate box)									
	9)	X	Tax basis	(Friend) G.	GAAP	Book	Other (att	ach e	xplanatio	n)					
		22	המלטים אם י				•								

Resident status (mark an X in all boxes that apply)

NYS full-year resident

Yonkers full-year resident

NYC full-year resident

NYS part-year resident

Yonkers part-year resident

NYC part-year resident

NYS nonresident

Yonkers nonresident

If the partner was included in a group return, enter the special NYS identification number, if known

L



Pa	ge 2 of 4 IT-204-IP (2009)				Van	No	x
М	1) Was Form IT-2658-E filed with the partnership?			M1	Yes	-	Λ
	2) Was Form MTA-405-E filed with the partnership?			M2	Yes	No	
N	NYS estimated tax paid on behalf of partner (from Form IT-2658)		Date		An	ount	
	1) First installment	N1					
	2) Second installment	N2					
	3) Third installment	N3					
	4) Fourth installment	N4					
	Total NYS estimated tax paid on behalf of partner (add lines N1 through	1 N4)		N			
0	Estimated MCTMT paid on behalf of partner (from Form MTA-405)		Date		An	nount	
	1) First installment	01					
	2) Second installment	02					
	3) Third installment	03					
	4) Fourth installment	04					
	Total estimated MCTMT paid on behalf of partner (add lines O1 through	n O4)		0			

Par	tner's share of income, deductions, etc.				
	A - Partner's distributive share items	B - Fed	eral K-1 amount	C - New Y	ork State amount
1	Ordinary business income (loss)	1.	6,413.	1.	6,413.
2	Net rental real estate income (loss)	2.		2.	
3	Other net rental income (loss)	3.		3.	
4	Guaranteed payments	4.		4.	
5	Interest income	5.		5.	,
6	Ordinary dividends	6.		6.	
7	Royalties	7.		7.	
8	Net short-term capital gain (loss)	8.		8.	
9	Net long-term capital gain (loss)	9.		9.	
10	Net section 1231 gain (loss)	10.		10.	
11	Other income (loss) Identify:	11.		11.	
12	Section 179 deduction	12.		12.	
13	Other deductions Identify:	13.		13.	
14	Tax preference items for minimum tax  Identify:	14.		14.	
15	Net earnings (loss) from self-employment	15.		15.	
16	Tax-exempt income and nondeductible expenses	16.	6,032.	16.	6,032.
17	Distributions - cash and marketable securities	17.		17.	
18	Distributions - other property	18.		18.	
19	Other items not included above that are required to be				
	reported separately to partners  Identify:	19.		19.	

## Partner's share of New York modifications (see instructions)

20 N	ew York State additions	•	
	Number	A - Total amount	B - New York State allocated amount
20a.	E A-		
20b.	EA-		
20c.	EA-		
20d.	EA-		
20e.	EA-		
20f.	EA-		

<sup>21</sup> Total addition modifications (total of column A, lines 20a through 20f)



## Partner's share of New York modifications (continued)

ew York State subtra	actions	,	
Number	A - Total amount B - New York State allocated amo	ount	
ES-			
tal subtraction mod	ifications (total of column A, lines 22a through 22f)	23.	
ditions to federal ite	emized deductions		
		•	
tal additions to fede	ral itemized deductions (add lines 24a through 24f)	25.	
btractions from fede	eral itemized deductions		
Letter	Amount		
al subtractions fron	n federal itemized deductions (add lines 26a through 26f)	27.	
w York adjustments	to tax preference items	28.	
r's other inform	nation		
tner's share of New	York source gross income	<b>29</b> a.	267,430
	employment allocated to the MCTD (see instructions)	29b.	
	Number E S- E S- E S- E S- E S- tal subtraction mod ditions to federal ite Letter  tal additions to fede btractions from fede Letter  al subtractions from	Number A - Total amount B - New York State allocated amount E S- E S- E S- E S- E S- E S- E S- E S-	Number A - Total amount B - New York State allocated amount E S -

Brov	vnfield redevelopment tax credit (Form IT-611 or IT-611.1)	
30	Site preparation credit component	30.
31	Tangible property credit component	31.
32	On-site groundwater remediation credit component	32.



#### IT-204-IP (2009) Page 4 of 4

#### Partner's credit information (continued)

EZ capital tax	credit i	(Form IT-602)
----------------	----------	---------------

33	Investments in certified EZ businesses	33.
34	Contributions of money to EZ community development projects	34.
	Recapture of credit for investments in certified EZ businesses	35.
	Recapture of credit for contributions of money to EZ community development projects	36.
~~	110001111111111111111111111111111111111	

#### QEZE tax reduction credit (Form IT-604)

CEZE	tax reduction credit in our record	
37	QEZE employment increase factor	37.
		38.
39	QEZE benefit period factor	39.

## QETC facilities, operations, and training credit (Form DTF-619)

40	Research and development property credit component	40.
41	Qualified research expenses credit component	41.
42	Qualified high-technology training expenditures credit component	42.

#### Farmers' school tax credit (Form IT-217)

,	1010 0011011 1	
43	Acres of qualified agricultural property	43.
44	Acres of qualified conservation property	44.
	Eligible school district property taxes paid	45.
• • •	——————————————————————————————————————	46.
	· · · · · · · · · · · · · · · · · · ·	

#### Other pass-through credit bases and factors

tites pu	33 Linough 0.0.			
Cre	dit bases			
	Code	Amount	Code	Amount
47a.			47d.	
47b.			47e.	
47c.			47f.	

Credit 1	factors								
(	Code	Factor		Code	Factor		Code	Factor	
47g.			47i.			47k.			
47h.			47j.			47i.			

## Part 2 - Pass-through credits, addbacks and recaptures

48	Long-term care insurance credit (Form IT-249)	48.
	Investment credit (including employment incentive credit and historic barn rehabilitation credit; Form IT-2	12)49.

50. 50 Research and development - investment credit (Form IT-212)

### 51 Other pass-through credits

Of Care	n pass anough	I Ol Odiko		
	Code	Amount	Code	Amount
51a.			51e.	
51b.			51f.	
51c.			51g.	
51d.			51h.	

#### 5

52	Addbacks of credits	s and recaptures		
	Code	Amount	Code	Amount
52	2a.		52d.	
52b.			52e.	
52	2c.		52f.	



## New York Partner's Schedule K-1

2009

IT-204-IP

Tax Law - Article 22 (Personal Income Tax)

Final K-1

For calendar year 2009 or tax year beginning

and ending

Amended K-1

Partners: Before completing your income tax return, see Form IT-204-IP-1, Partner's Instructions for Form IT-204-IP(available at www.nystax.gov).

Partnership's information (see instructions)

A Mark an X in the box if either applies to your entity

Partnership's name (as shown on Form IT-204)

Partnership's ElN

83-0396188

REPUBLIC GROUP, LLC

Publicly traded partnership

Portfolio investment partnership

Tax shelter registration number, if any

В

Business allocation percentage

C

100.0000

Partner's information (see instructions)

INA SAMUELS MARTINEZ

Partner's name

Partner's identifying number

263-81-0455

Partner's address

300 HOPPER COURT

State

ZIP code

FRANKLIN LAKES

ŊJ

07417

D	The	partne	r İS a (mark an X in the ap	propriate box)	General partner or	LLC membe	r-mana	ger	X	Limited	partner or	other LLC mem	nber
E	Wha	t is the	tax filing status of t	he partner? (mark an X	in the appropriate box, if kn	own.)	X	Individ	lual	Esta	ate/trust	Partner	ship
F	If the partner is a disregarded entity or grantor trust,												
	en	ter the	tax ID of the entity of	or individual reporting	g the income, if know	n				F			
G	Did t	he par	tner sell its entire int	erest during the tax	year?					G	Yes	No	X
н	Partr	ner's sl	nare of profit, loss, a	nd capital					Begin	ning		Ending	
	1)	Profit					1	H1	5.	0000	%	5.0000	%
	2)	Loss					1	H2	5.	0000	%	5.0000	%
	3)	Capit	al				1	НЗ	5.	0000	%	5.0000	%
ı	Partr	ner's si	nare of liabilities at th	ne end of the year									
	1)	Nonre	ecourse							11			
	2)	Quali	fied nonrecourse fina	ancing						12			
	3)	Reco	urse							13			
J	Partr	ner's ca	apital account analys	sis									
	1)	Begin	ning capital accoun	t						J1		-3,78	32.
	2)	Capit	al contributed during	g the year - cash						J2			
	3)	Capit	al contributed during	g the year - property						J3			
	4)	Curre	nt year increase (de	crease)						J4		2	21.
	5)	Withd	rawais and distribut	ions - cash						J5			
	6)	Withd	rawals and distribut	ions - property						J6			
	7)	Endin	g capital account							J7		-3,76	51.
	8)	Metho	od of accounting (ma	ark an X in the appro	priate box)								
	•	X	Tax basis	GAAP	Book	Other (att	ach ex	planati	on)				

Resident status (mark an X in all boxes that apply)

NYS full-year resident

Yonkers full-year resident

NYC full-year resident

NYS part-year resident

Yonkers part-year resident

NYC part-year resident

X NYS nonresident Yonkers nonresident

L If the partner was included in a group return, enter the special NYS identification number, if known

L



M 1) Was Form IT-2658-E filed with the partnership?			M1	Yes	No	X
2) Was Form MTA-405-E filed with the partnership?			M2	Yes	No	
N NYS estimated tax paid on behalf of partner (from Form IT-2658)		Date		Am	ount	
1) First installment	N1					
2) Second installment	N2					
3) Third installment	N3					
4) Fourth installment	N4					
Total NYS estimated tax paid on behalf of partner (add lines N1 through	gh N4)		N			
O Estimated MCTMT paid on behalf of partner (from Form MTA-405)		Date		An	nount	
1) First installment	01					
2) Second installment	02					
3) Third installment	03					
Fourth installment	04					
Total estimated MCTMT paid on behalf of partner (add lines O1 through	gh O4)		0			

## Partner's share of income, deductions, etc.

	A - Partner's distributive share items	B - Federal K-1 amount		C - New York State amount	
1	Ordinary business income (loss)	1,	338.	1.	338.
2	Net rental real estate income (loss)	2.		2.	
3	Other net rental income (loss)	3.		3.	
4	Guaranteed payments	4.		4.	
5	Interest income	5.		5.	
6	Ordinary dividends	6.		6.	
7	Royalties	7.		7.	
8	Net short-term capital gain (loss)	8.		8.	
9	Net long-term capital gain (loss)	9.		9.	
10	Net section 1231 gain (loss)	10.		10.	
11	Other income (loss) Identify:	11.		11.	
12	Section 179 deduction	12.		12.	
13	Other deductions Identify:	13.		13.	
14	Tax preference items for minimum tax  Identify:	14.		14.	
15	Net earnings (loss) from self-employment	15.		15.	
16	Tax-exempt income and nondeductible expenses	16.	317.	16.	317.
17	Distributions - cash and marketable securities	17.		17.	
18	Distributions - other property	18.		18.	
19	Other items not included above that are required to be				
	reported separately to partners	19.		19.	
	Identify:				

### Partner's share of New York modifications (see instructions)

20 New York State additions

Number A - Total amount B - New York State allocated amount

20a. E A
20b. E A
20c. E A
20d. E A
20e. E A
20f. E A-

21 Total addition modifications (total of column A, lines 20a through 20f)

1182091019 CLENT' 1182091019

21.

## Partner's share of New York modifications (continued)

22 New York State subtract	etions		
Number		- New York State allocated amount	
22a. E S-			
22b. E S-			
22c. E S-			
22d. E S-			
22e. E S-			
22f. E S-			
23 Total subtraction modifi	cations (total of column A, lines 22a	a through 22f) 23.	
24 Additions to federal item	nized deductions		
Letter	Amount		
24a.	· · · · · · · · · · · · · · · · · · ·		
24b.			
24c.			
24d.			
24e.			
<b>24f.</b>	•	•	
25 Total additions to federa	al itemized deductions (add lines 24	ta through 24f) 25.	
26 Subtractions from federa	al itemized deductions	·	
Letter	Amount		
26a.			
26b.			
26c.			
26d.			
26e.	•		
26f.			•
27 Total subtractions from f	federal itemized deductions (add lin	nes 26a through 26f) 27.	
28 New York adjustments to	o tax preference items	28.	
Partner's other informa	ation		
29a Partner's share of New Y	ork source gross income	29a.	14,075.
29b Net earnings from self-en	mployment allocated to the MCTD (	(see instructions) 29b.	
Partner's credit informa	ation		
Part 1 - Pass-through c	redit bases and factors		
Brownfield redevelopment ta:	x credit (Form IT-611 or IT-611.1)		
30 Site preparation credit co		30.	
31 Tangible property credit of		31.	



32.

32 On-site groundwater remediation credit component

#### IT-204-IP (2009) Page 4 of 4 Partner's credit information (continued) EZ capital tax credit (Form IT-602) 33 Investments in certified EZ businesses 33. 34 Contributions of money to EZ community development projects 34. 35 Recapture of credit for investments in certified EZ businesses 35. Recapture of credit for contributions of money to EZ community development projects 36. QEZE tax reduction credit (Form IT-604) 37 QEZE employment increase factor 37. 38 QEZE zone allocation factor 38. QEZE benefit period factor 39. QETC facilities, operations, and training credit (Form DTF-619) 40 Research and development property credit component 40. Qualified research expenses credit component 41. 42 Qualified high-technology training expenditures credit component 42, Farmers' school tax credit (Form IT-217) 43 Acres of qualified agricultural property 43. 44 Acres of qualified conservation property 44. Eligible school district property taxes paid 45. 46 Acres of qualified agricultural property converted to nonqualified use 46, Other pass-through credit bases and factors Credit bases Code Amount Code **Amount** 47a. 47d. 47b. 47e. 47c. 47f. Credit factors Code Factor Code Factor Code **Factor** 47g. 47i. 47k. 47h. 47j. 47I. Part 2 - Pass-through credits, addbacks and recaptures 48 Long-term care insurance credit (Form IT-249) 48. 49 Investment credit (including employment incentive credit and historic barn rehabilitation credit; Form IT-212)49. Research and development - investment credit (Form IT-212) 50. 51 Other pass-through credits Code Amount Code Amount 51a. 51e. 51b. 51f. 51c. 51g. 51d. 51h.

52 Ad	dbacks of credit	s and recaptures		
	Code	Amount	Code	Amount
52a.			52d.	
52b.			52e.	
52c.			52f.	



▼ Employer identification number

83-0396188

2009

## **Estimated Tax Penalties for** Partnerships and New York S Corporations

(For underpayment or nonpayment of estimated tax required to be paid on behalf of partners and shareholders who are corporations or nonresident individuals)

For calendar year 2009 or fiscal year beginning

and ending

Legal name

REPUBLIC GROUP, LLC

Trade name of business if different from legal name above

Address (number and street or rural route)

Type of entity (mark an X in the applicable box):

260 WEST 36TH STREET, SUITE 901

City, village, or post office NEW YORK

State ZIP code

NY 10018

X Partnership

S corporation

Complete Schedules A through D on pages 2, 3, and 4, as applicable, to compute your penalty.

Staple check or money order here.

Pay amount shown on page 4, line 52. Include only the line 52 amount in your check or money order, and make payable to: Commissioner of Taxation and Finance

Payment enclosed

26

File Form IT-2659 by the later of April 15, 2010, or the due date of the partnership or S corporation tax return for the year (determined with regard to any extension of time to file).

Do not attach or file Form IT-2659 with any other form.

Paid preparer must complete

Preparer's signature

SSN or PTIN:

Sign your return here Signature of general partner or member, elected officer, or authorized person

Firm's name (or yours, if self-employed)

P00009773

Employer Identification number

SANSIVERI, LONG & CO., L.L.C. 22-3769808

Mark an Xif self-employed

1135 CLIFTON AVENUE SUITE 101

CLIFTON, NJ 07013

Date

Daytime phone number

E-mail:

E-mail:

Mail this form and payment to: NYS TAX DEPARTMENT - IT-2659 PO BOX 397 **ALBANY NY 12201-0397** 

984101 12-30-09

0691091019

Schedule A - Computation of estimated tax underpayment (if any). All filers must complete this part. Only include partners and shareholders who are subject to estimated tax paid on their behalf by the partnership or New York S corporation (see instructions).

	Current year				
	1 Total of all nonresident individual partners' or shareholders' distributive or pro rata shares of				
	2009 income earned from New York sources	1,	6,413.	-	
;	2 Total of all nonresident individual partners' or shareholders' shares of 2009 partnership		.,		
	deductions allocated to New York (see instructions)	2.	0.		
;	3 Subtract line 2 from line 1	3	6,413.		
	Individual tax rate (8.97%)	4.	.0897		
	5 Multiply line 3 by line 4	<del></del> 5.	575 <b>.</b>		
(	Total of all nonresident individual partners' or shareholders' distributive or pro rata shares of	<b>V.</b>	575.		
	2009 partnership or S corporation credits	6.	0.		
7	2009 estimated tax required to be paid on behalf of nonresident individuals (subtract line 6	0. fmm line 5)	0.	7.	575.
8	Total of all corporate partners' distributive shares of 2009 income earned from NY sources	nomine sy	0.	<i>'</i> .	575.
ę		0.	.071		
10	Multiply line 8 by line 9	10	.071		
11	Total of all corporate partners' distributive shares of 2009 partnership credits	10.	0.		
12	2009 estimated tax required to be paid on behalf of corporations (subtract line 11 from line	11	٠.	12.	^
13	Total estimated tax required to be paid for 2009 (add lines 7 and 12)		••••••	13.	0. 575.
14	90% of the estimated tax required to be paid for 2009 (multiply line 13 by 90% (.90))	• • • • • • • • • • • • • • • • • • • •	***************************************	10.	518.
	Prior year			14.	210.
15	Total of all nonresident individual partners' or shareholders' distributive or pro rata shares of				
	2008 income earned from New York sources				
16	Total of all nonresident individual partners' or shareholders' shares of 2008 partnership	141			
	deductions allocated to New York (see instructions)	16.	;		
17	Subtract line 16 from line 15	17			
18	Individual tax rate (8.97%)	18	.0897		
19	Multiply line 17 by line 18	19.	.0001		
20	I otal of all nonresident individual partners' or shareholders' distributive or pro rate shares of				
	2008 partnership or S corporation credits	20			
21	2008 estimated tax computed for individuals (subtract line 20 from line 19)	., 20.		21.	
22	Total of all corporate partners' distributive shares of 2008 income earned from NY sources	99		21.	
23	Corporation tax rate (7.1%)	22.	.071		
24	Multiply line 22 by line 23	. 24	.071		
25	Total of all corporate partners' distributive shares of 2008 partnership credits	25			
26	2008 estimated tax computed for corporations (subtract line 25 from line 24)	., 20.		26.	
27	Total estimated tax computed for 2008 (add lines 21 and 26)			20. 27.	
	If the sum of lines 17 and 22 is more than \$150,000, and the entity is not primarily	************************	**,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	21.	
	engaged in farming or fishing, complete line 28 and continue with Schedule B. If the				
	sum of lines 17 and 22 is \$150,000 or less, skip line 28 and continue with Schedule B.				
28	Multiply line 27 by 110% (1.10)			28.	
		*****************	I	20.	
Sch	edule B - Short method for computing the penalty. See Important note on Form IT	26EQ L Comm	loto linea 00 through	b 04 H	
estir	nated tax installments (on the due dates), or if you made no payments of estimated t	tax. Otherwise	. vou must complet	e Schedule (	C
	If you were not required to make an entry on line 28, enter the lesser of lines 14 or 27.		, , ,		
	If you were required to make an entry on line 28, enter the lesser of lines 14 or 28			29.	518.
30	Enter the total amount of estimated tax payments made for 2009				_
31	Total underpayment for the year (subtract line 30 from line 29; if zero or less you do not		***************************************	30.	0.
-	owe the penalty)			04	518.
32	Multiply line 31 by .04985 and enter the result			31. 22	
33	If the amount on line 31 was paid on or after April 15, 2010, enter 0. If the amount on line 31 w	na naid		32.	26.
	before April 15, 2010, make the following computation to find the amount to enter on this line				
	Account on Property and the second of the se				•
34	Amount on line 31 x number of days before April 15, 2010 x .00020 =  Penalty (subtract line 33 from line 32; enter here and on line 51)	•		33.	0.
V7	onking toolood wife oo from wife o2, enter fiere and on line 51)	· · · · · · · · · · · · · · · · · · ·		34.	26.



(continued)

Part 1 - Computing the underpayment							
Payment due dates	A 4/15/09		<b>B</b> 6/15/09	C	9/15/09	D	1/15/10
35 Required installments (see instr.) 35.							
36 Estimated tax paid 36.			•				
Complete lines 37 through 39, one column							
at a time, starting in column A.							
37 Overpayment or underpayment from prior period 37.							
38 If line 37 is an overpayment, add lines 36 and 37; if line 37 is							
an underpayment, subtract in 37 from in 36 (see instr) 38.							
39 Underpayment (subtractifine 38 from line 35) OF overpayment							
(subtract line 35 from line 38; see instructions) 39.							
Part 2 - Computing the penalty							
Payment due dates	A 4/15/09		<b>B</b> 6/15/09	C	9/15/09	D	1/15/10
40 Amount of underpayment (from line 39) 40.		-					
First installment (April 15 - June 15, 2009)							
41 April 15 - June 15 =							
$(61 \div 365) \times 7.5\% = .01253$							
- 01 -							
April 15 - =							
( ÷ 365) x 7.5% =							
41.							
42 Multiply line 40, column A, by line 41 42.							
Second installment (June 15 - September 15, 2009)							
43 June 15 - September 15 = (92 ÷ 365) x 7.5% = .01890	)						
- or -							
June 15 - = $( \div 365) \times 7.5\% =$							
		43.					
44 Multiply line 40, column B, by line 43		44.					
Third installment (September 15, 2009 - January 15, 201	•						
45 September 15 - January 15 = (122 ÷ 365) x 7.5% = .0	2506						
- 07 -							
September 15 - = ( $\div$ 365) x 7.5% =							
				45.			
46 Multiply line 40, column C, by line 45		•••••		46.			
Fourth installment (January 15 - April 15, 2010)							
47 January 15 - April 15 = (90 ÷ 365) x 7.5% = .01848			•				
- or -							
January 15 - = $( \div 365) \times 7.5\% =$							
						47.	
48 Multiply line 40, column D, by line 47						48.	
49 Penalty (add lines 42, 44, 46, and 48)						49.	



(continued)

Schedule D - Failure to pay estimated tax on behalf of partners or shareholders who are corporations or nonresident individuals. Only include partners and shareholders who are subject to estimated tax paid on their behalf by the partnership or New York S corporation (see instructions). If you are listing more than six partners or shareholders, attach additional sheet(s) using the same four-column format as in the chart below. Include all column D totals from additional sheets on the line provided.

A	8	C	Đ
Name of partner/shareholder	ldentifying number (EIN/SSN)	Number of quarters (1-4) during the year estimated tax was not paid	Column C x \$50
olumn D total from attached sheet(s) (if any)			
50 Penalty (total of column D)		50.	(
51 Penalty (from line 34)			26
52 Total penalty (add lines 49, 50, and 51, as applica	ble; enter here and inPayment enclose	ed box on page 1) 52.	26

## Form 16A. CAPTION (FULL)

# United States Bankruptcy Court

Sorthern District Of New york

In re Republic Grop, LLC  [Set forth here all names including married, maiden, and trade names used by debtor within	) (
last 8 years.]	•
Debtor )	Case No.
Address 260 West 3672 St, Rey 901	; !
Newyork, Ny 10018	Chapter <u>11</u>
Last four digits of Social-Security or Individual Tax-	
Payer-Identification (ITIN) No(s)., (if any): 83-53 96)	
_188	
Employer Tax-Identification (EIN) No(s).(if any):) 83-0396188	

[Designation of Character of Paper]

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF NEW YORK	x				
In Re: Republic Group, LLC	: : Chapter 11 Case No : :				
ORDER SCHEDULING INITIAL	L CASE CONFERENCE				
Republic Group, LLC (the "Debtor") having file of the Bankruptcy Code on January 28, 2011, and management conference will aid in the efficient of	I the Court having determined that a case				
ORDERED, pursuant to 11 U.S.C conference will be conducted by the undersigned Bankruptcy Court, One Bowling Green, New Yo 10:00 a.m., or as soon thereafter as counsel may lof the case, which may include, <i>inter alia</i> , such to committee to review budget and fee requests, use and scheduling of additional case management co	rk, New York 10004 on February 20, 2011, at be heard, to consider the efficient administration opics as retention of professionals, creation of a e of alternative dispute resolution, timetables,				
ORDERED, that the Debtor shall give notice by mail of this order at least seven days prior to the scheduled conference to each committee appointed to serve in the case pursuant to 11 U.S.C. § 1102 (or, if no committee has been appointed, to the holders of the 10 largest unsecured claims), the holders of the five largest secured claims, any postpetition lender to the Debtor, and the United States Trustee, and shall promptly file proof of service of such notice with the Clerk of the Court.					
Dated:, New York					
UN	ITED STATES BANKRUPTCY JUDGE				